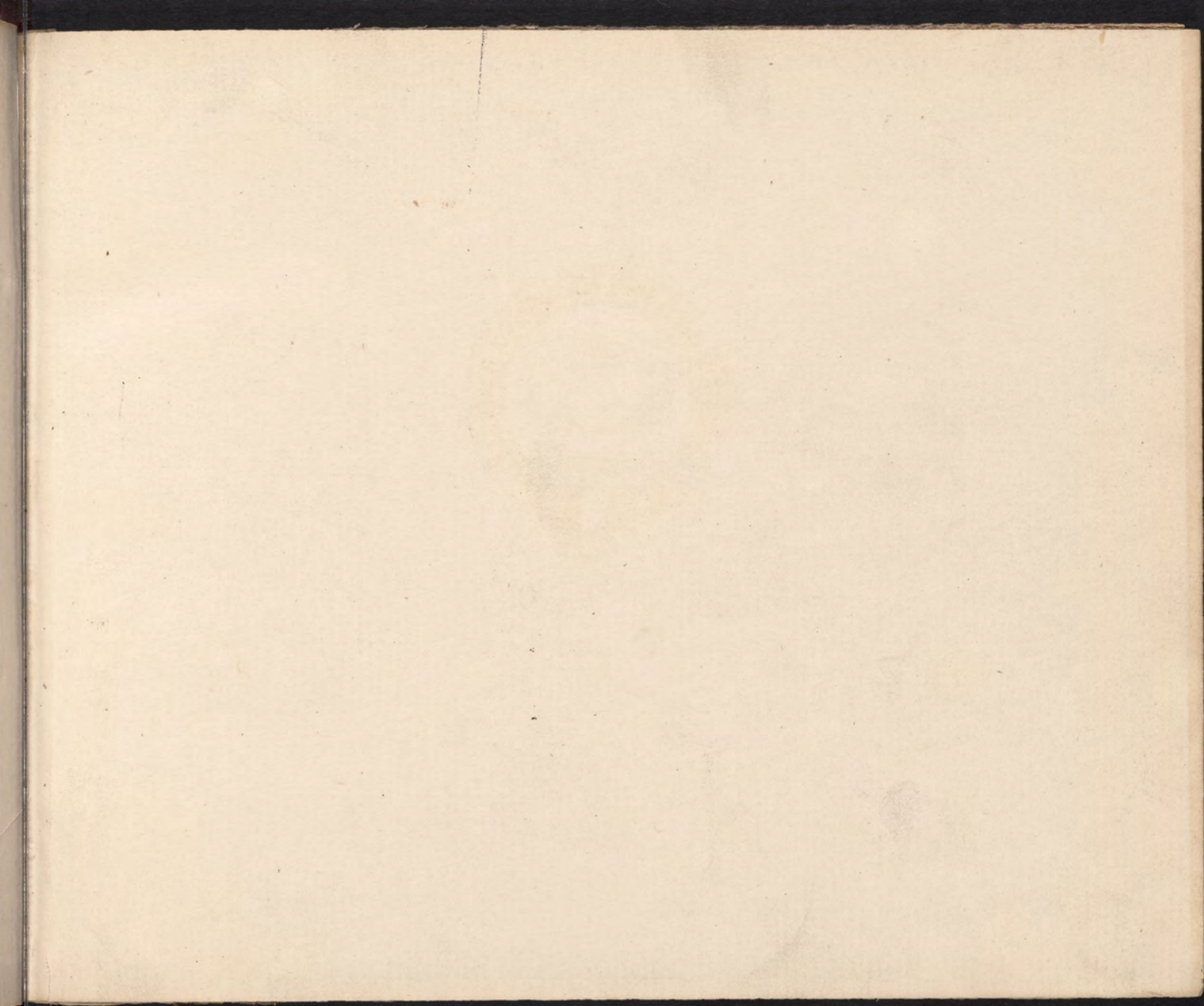


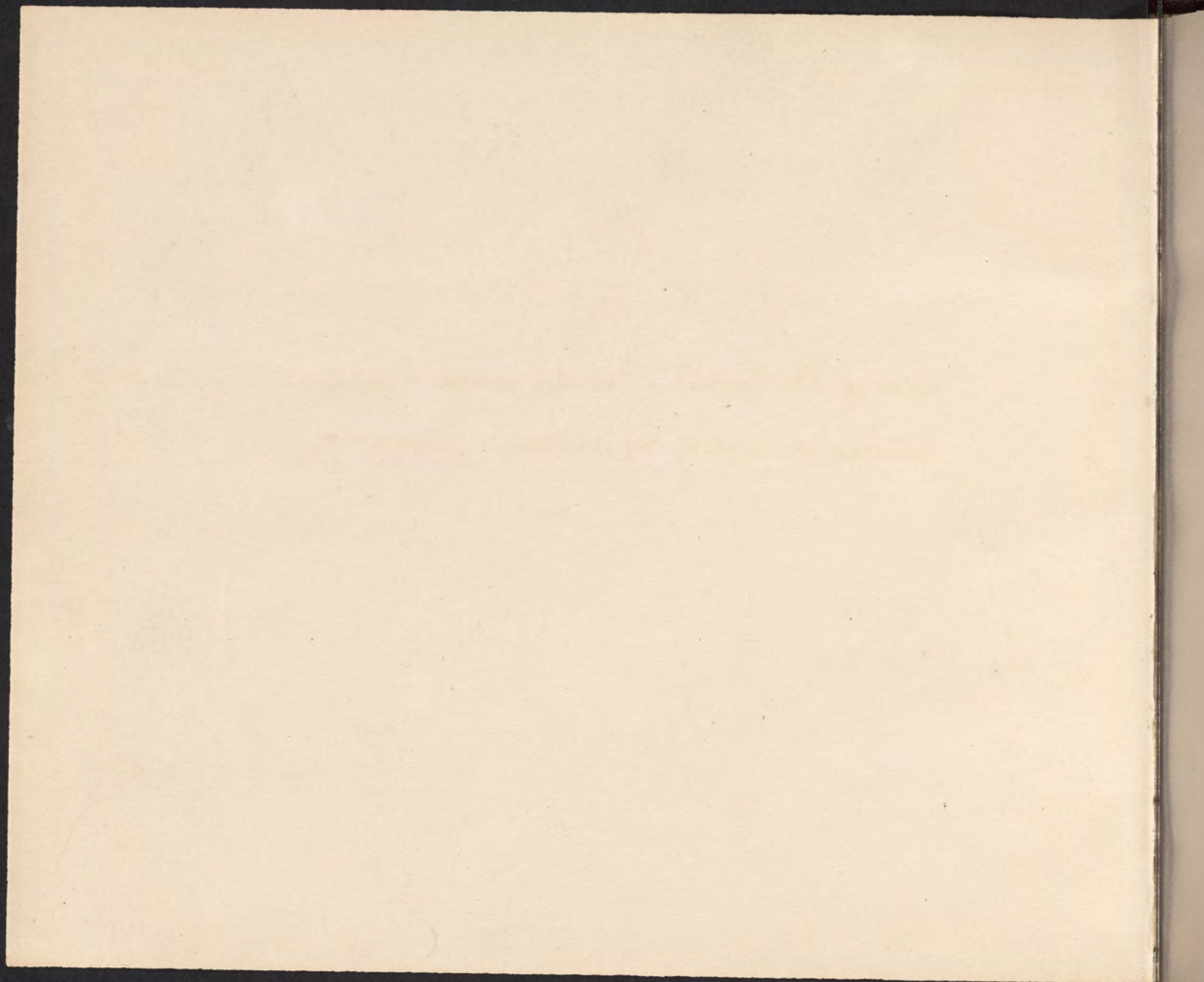
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Notes of Dr. Parrish's winter course of surgical  
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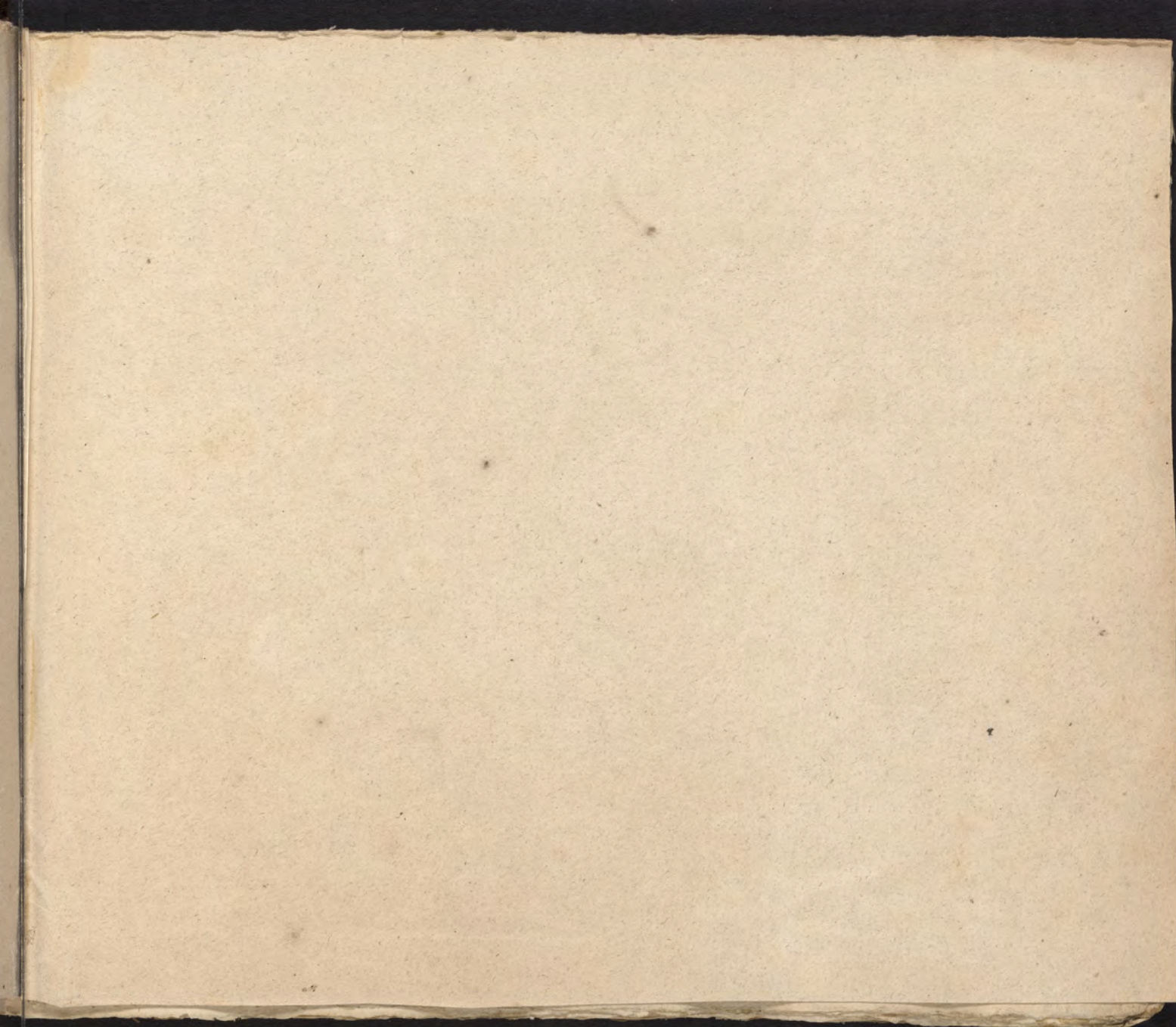
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J. J. Parrish  
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by  
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M.D.  
1845





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Wm. Ashmead is

Dr. Jos. Parrish's  
Winter Course  
of  
Surgical Lectures  
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N. 2

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November 8  
 me to so much  
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 me to produce  
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November 8<sup>th</sup> / 1824 Dr J. Parrish's Surgical lectures

November 8<sup>th</sup> / 1824 Inflammation is the first object in surgery, that presents itself to our consideration it is so invariable attendant on surgical operations that it requires to be particularly understood, particular nature, inflammation occurring in a part, parts is <sup>characterized by</sup> increased heat, redness, swelling, pain, tumefaction, which are its most remarkable local symptoms, (redness increased), (swelling quantity of blood in part), (sensed heat as a preternatural nerve sensibility), tumefaction - depends on dilatation of <sup>formation</sup> of new vessels of an arterial & venous <sup>in vessels & in the tissue</sup> ~~plethoric~~ condition. These causes all con-  
cure to produce the phenomena of inflammation. (heat of part accords to home is not increased by <sup>sensate of the</sup> depends on peculiar condition of nervous system. <sup>by inflammation</sup> (vessels are enlarged) is illustrated by inflammation of eye which feels before invisible more <sup>dilate</sup> carrying red blood. The causes are various impossible for I wish to impress  
on you the importance of a particular fact that inflammation is not a unit, the belief of unity of infla-  
mation to incorrect practice I have known men attempt to cure bubo & chancre believing in unity  
of inflammation by depletion but this proves unsuccessful. inflammation is various various means to cure it.  
leguminous, it is important to study specific inflammation, which is frequently not impracticable as for  
instance of an abscess gland suppurates an injury of foot of inflammation travels up legs (glands in groin  
blame of a large tumor is formed & runs on to suppuration of is a favorable instance of phlegmonous inflammation.  
this (abscess <sup>is attended a</sup> not peculiarity, it is always circumscribed. (same part may involve same) of scrofula  
inflammation attacks in part slowly is not slowly, less intense, discharge is very different there, here caseous  
one rapid in its progress, other slow, suppurates a small bubo & in part there is inflamed tumor but  
our is mostly darker, it goes on & pus is formed but apply this to be treated on the same principle as  
leguminous with not be result it will remain uncurable but by proper treatment (mercury to system) will soon  
be a cure hence importance to understand importance of inflammation. Apply same gland to be affected not  
serious inflammation it will not be attended with same results, but inflamed & ulcerate finally are slow & extensive  
inflammation altogether uncurable except by knife & (why stage) depends on all treatment, <sup>which have identified with</sup> inflammation is encircling  
tumor is very different Home gives an excellent description of changes of structure in cancer. Its species are  
leucemia this may be regarded healthy operation calculated to serve important purposes, it is healed by surgery

often an open wound but find it he wounds it not joy. when not the <sup>surgeon</sup> does with it? his true care is reg-  
to regulate it, if it rises too high (surgery should interfere & suppress it or if too low endeavor to exert  
example a hot excision of a large tumor should (if possible) remain in a state constitutional & reliable  
but if inflammatory action takes place, system sympathizes w<sup>th</sup> it, wound fever results, <sup>the consequence always an enemy</sup> fever is by no means, it is  
regarded as a necessary evil, & thus cavity is filled up results coagulation of ~~the~~ blood of union & reparative  
granulations are either or new formed vessels (new blood vessels) protect them, cicatrize the place, & it should  
be invariable subject to rule of suppuration if <sup>it rises</sup> too high. It proceeds not w<sup>th</sup> violence without parts accord-  
ing to it is more vascular or more superficial progress is more rapid & generally more safe, but phlegmon, in-  
tention often more violent & dangerous, in skin & muscle it is more manageable, thus little sensibility & tend-  
<sup>may be</sup> not cut or twisted w<sup>th</sup> pain but diss is acutely sensible. varies also in constitutional effect some it is  
w<sup>th</sup> much constitutional sympathy, & other slight inflammation cause great constitutional reaction. in (fascia) goes great  
suffering and danger (70) adhesion inflammation move apart to the place & cellular membrane of even vessels & vessels  
& opening arteries there is no better mark of pro- inflammation than adhesions. (mucous tissue) only su-  
per- <sup>deep seats wounds seem impossible to repair here</sup> in gun shot wounds ~~the wound is~~ if only (thing) cellular membrane are wounds support the place if  
(bullet is deep seats a clot is found in close it, thus depth determines result, if more superficial support  
takes place, support in incision attended throbbing, more prominent, vigorous, open ligament to surface, if  
treatment the place how is this to be liberated, when pus is confined it tends to seek surface, what agents  
are employed in this process? (absorbents remove cellular membrane muscles skin that is  
terrene. & phlegmons obstruct & erysipelas (abscess is circumscribed owing to effusion of coagulated  
lymph & adhesion inflammation this forming a barrier to diffusion of pus, at same time vessels or  
themselves by discharging pus now absorbents are called into action by process of turner here we have an  
evidence of harmony prevailing th<sup>rough</sup> system. how is cavity filled? by formation of granu-  
lations formed by enlarged original vessels of front of new, pus is secreted to protect them, cavity is filled up  
and a cicatrix or new skin is formed which closes up sore.



I have seen w/whl abdomen covered by the dis and pus diffused throughout / parities of cavity

hence arose that got protel improvement, that peculiar inghentry dispostn have taken possen-  
 part, it requires <sup>more</sup> usual time for aphetic of a blister to overrun it & at one time to perform its usual  
 operatu, all poultes & uncts apheticus are injur, as pus looks to an indifut extnt in sellr mem  
 this teaches us an importnt protel lesn, fr if protur wait for points of tuor, importnt time  
 pass, it is importnt to open cavity at an vly period by a free incision, that the contents may be fully  
 evacuated, & give room for a pasage of dead cellular membrane wh wld plug up - nul ovifice  
 under our <sup>effts</sup> of no avail. bridges in this stage are vry benef to bring parts in contact, this  
 not, the vgmens will arse adhave inghentry - crown our effts w/ succs. among terminal  
 gacu - mortificn are not uncommon, when you observe a put not the dis passing lived to blue,  
 settle upon w/face, heat declining, p'n diminish, & countenance sunk, <sup>cessed if purple</sup> <sup>febrile state of system slowly changed</sup> <sup>most gnam approach to death</sup> <sup>there is extreme danger of very to mort</sup> <sup>of kind, one by previous infl</sup> <sup>we treat it</sup> <sup>2 holes are made</sup> <sup>very inflant</sup> <sup>not if con</sup> <sup>exten</sup>  
 lifeten the p'ce / turnefeln is less, <sup>generates upon till entire</sup> <sup>loss of genital</sup> <sup>or cogulate in leg or arm</sup> <sup>vefelo</sup> <sup>of mgs of leg</sup> <sup>Northfeln - spely attchs</sup> <sup>not if con</sup> <sup>exten</sup>  
 lifeten the p'ce / turnefeln is less, <sup>generates upon till entire</sup> <sup>loss of genital</sup> <sup>or cogulate in leg or arm</sup> <sup>vefelo</sup> <sup>of mgs of leg</sup> <sup>Northfeln - spely attchs</sup> <sup>not if con</sup> <sup>exten</sup>

1 case <sup>rock fell on a milk arse</sup> <sup>that</sup> <sup>the full extnt of injury was not at first discerned, no</sup>  
 A man had fallen from a height ~~several~~ <sup>several</sup> feet, recvd contusion with laceratu, he was brought to  
 Hosp'tl - common apphetus were made, bt b'fr extnt of injury was discerned, <sup>the full extnt of injury was not at first discerned, no</sup>  
 had commenced - he soon sunk, Mortificn is also spely attended on some lacerated n

12  
 evacuated wounds, &c. An Irishman shattered his arm to such a degree that immediate ampu-  
 tation wold have given him great relief, he was not brought to hospital till several days after accident  
 and now mortification commenced rising rapidly up his arm he was much debilitated by a constipation  
 of the bowels & Dr. Barry was of opinion that it wold be of use not to amputate in his present condition, mor-  
 tification still advancing he was removed to the ward & a blister was applied just above elbow, we allowed him generous diet & wait for new skin to form on the  
 distended surface, at this time a violent pain attacked his chest not cough & expectoration of phlegm which being relieved  
 he was able to breathe. Little blood & detritus muscle, skin was hard & effect of blistering & bones presented appearance of  
 more shell filled with purulent matter cancellated structure was destroyed & a probe passed in the  
 vicinity of head of bone. Dressings were now placed over stump as usual, he was allowed patient  
 generous diet & waited for effort of nature, bone filled with granulations & stump healed & no exfoliation  
 occurred. Mortification well a woman of intemperate habits fractured her thigh bone & was  
 admitted into the hospital the next day she was examined closely & rely on statement of  
 physicians who seen her at time of accident, reoperation of the thigh was required on upper part  
 of leg 7 days before, poultices were applied, feet of bed elevated, soon after convulsions came  
 from being deprived of her accustomed stimulus & of sound arm every 4 hours & convulsions  
 were felt in body & arms. Mania potentia came on yet withstanding copious use of stimulants  
 blister was now applied when view well, much julep given, but mania continued  
 till the death, heads of tibia & fibula were both broken & mud spicula were found floating in a large  
 quantity of pus. Case a prost - was swarming on island, she fell upon her knees, both bones  
 broken & extremities paralyzed in same, mortification commenced in 48 hours & soon deprived her of life.  
 long exposure to cold & dampness is a cause of mortification a drooping boy going into a cellar to  
 shelter himself from inclemency of weather when some artificers were at work, the men on  
 his house fastened it up & did not return for 3 days during that time boy was in the damp cell  
 we found very much debilitated both legs in state of mortification no line of separation well. (above)  
 dark flesh hung ragged, blew this line, in few days with aid of generous diet gained strength

he regained his strength & amputated w<sup>s</sup> performance, <sup>belong (hues) 12</sup> not <sup>13</sup> necess<sup>y</sup>. heat will also pr  
duce same effect, if <sup>moderat</sup> steadily applied in dropsical persons, it will cause <sup>or debilitat</sup> slough, of pa  
so exposed. <sup>14. 15</sup> pressure also causes slough. <sup>death of</sup> Interruption of circulation. - as in strangled hernia

Phlegmon or Erysipelas (4)

A gentleman of a consumptive family, had been at Nova Scotia, wh<sup>r</sup> from exposure to wet & cold he was  
attacked w<sup>t</sup> sore throat which at times grew <sup>worse</sup> quite well & again worse, in addition he had been  
w<sup>t</sup> a hacking cough this had lately disappeared. on examining his throat redness app<sup>r</sup> very evident, w<sup>t</sup> had  
the characters of Erysipelas, a gargle of bark alum & sage water were recommended. in a few ~~days~~ <sup>days</sup> he was att<sup>d</sup>  
symptoms of intercurrent for w<sup>h</sup> he took bark internally w<sup>h</sup> — the latter complaint and  
course of mild pector was used w<sup>t</sup> saline mixture, throat began to swell externally, a blood

was applied at the neck of Dr. W<sup>t</sup>, this was repeated sev<sup>l</sup> times & gargles of borax used, his system was gradually  
cleared w<sup>t</sup> given to support him. now a spoude of larynx and its aperture which Dr. Robt<sup>son</sup> gave an account  
w<sup>h</sup> relieved him & this throbbing symptom, b<sup>t</sup> he complained of ap<sup>r</sup> at his breast & that air seemed impure. Examining  
James I discovered tumefaction posterior to half arches, also anterior part of neck been tumefied w<sup>t</sup> greatly internally,  
he frequently complained of larynx being too thin to bear pressure of tumor, & this caused in my opinion a p<sup>r</sup> of both  
soon lay in articulo mortis, when of larynx returned, his countenance was livid w<sup>t</sup> Dr. W<sup>t</sup> app<sup>r</sup> was caused by  
on jugular vein and soon died. Examination post mortem. upon making an incision to skin to sternum, p<sup>r</sup>ectus  
in large quantities, & a large abscess sh<sup>d</sup> itself reaching to mastoid process to sternum, larynx ap<sup>r</sup>ed thin as a lace  
~~right lung~~ away. the lungs adhered to pleura in almost every part and some tubercles scattered about,  
we had no doubt, had <sup>nature of</sup> been v<sup>l</sup>y known of a free incision made he might have had some prospect  
recover

leprosy is terminated by resolution which is nothing more than the disappearance of pus or  
 the fluids, purulent suppuration, mortification is rare after this kind, thus proves that mortification is  
 so much a result of preceding inflammation or excessive action as this is <sup>not</sup> very high as it is of inflammation of a  
 septic nature, laemorrhage of itself, & by effusion of lymph and thus (finds) tumours  
 laid often of a dangerous character. Treatment proper in this case, if it may be called a case, after an  
 attack it may run too high, I've got skill to know when to interfere, if it is any got endeavor to suppress it  
 is not desirable to any extent, if (system symptoms of) laudable hemorrhage, bleed, low diet, prozing, let bleeding,  
old apples, lead water, most these quickly produce a resolution if you very great, opiate, if not for count  
 then not opiate to if posture of gravity operates a certain degree or excess, hence improvement  
water (put to rest) flow in veins. In addition if in a just perfect vessel is necessary by a splint this is of  
 most importance, if we find it not resolved & abscess have formed, most apply fomentations to hasten of  
 your suppuration, soft poultice bread milk or if much by not landmen (when glacial) open it  
 own method is by lance, cautery is rarely necessary, suppuration forming near large vessels requires to be opened  
 either in the other places, I suppose a suppuration the place on (thus) though it is a true pus always seeks surface  
 & there is nothing to prevent almost removal of the muscle to an internal direction, excited by force of opening  
 usually. <sup>as it is bounded abstract, thus have broken into the</sup> but after being opened & emptied, got influence of <sup>very large</sup> cavity of constitutional symptoms arise hence after  
 ceases dissects large & deep abscess to be opened by valve or oblique opening & closed up by adhesion  
 hasten quickly adhesion by first incision the place, if it has again collects again discharge it by valve opening  
 as they may be frequently & successfully healed, this is a peculiar secret of art of inflammation, is healthy & best  
 formed, perfectly blind when pure, heavier than water with mucus in it, does not only putrify but misce  
 bone of an indoluble factor, pus & lungs not is a felt to be destroyed & immunes this means it is suppo  
 & ammonia is best test.



1. erysipelatous do only do much good but often much harm, a practical caution <sup>should you remember</sup> when erysipelatous  
reason to suppose / abscess is not circumscribed / put through thing (cellulose tissue, in inflamed not even  
abscess cavity cause a point, and it is proper to wait for it <sup>may</sup> to pass, not so erysipelatous, if it will  
a few points but as soon as by feeling we are satisfied that effusion is there place, make  
fair of free incision often we can through this draw out masses of dead cell  
in members of all this must be got ready before it can heal, extensive abscesses of, after infla-  
tion of secretions it is necessary to change treatment of tonics are generally necessary  
the porter wine of often necessary to support patients under process that en-  
ces. Gangrene & Mortification are among the commensurate mentioned  
not by violent injury a part is suddenly deprived of life often a severe blow on (when part is at  
is deprived of life not <sup>very</sup> long of patient, tissue is removed by absorbents & cavity healed up by usual means  
intensive destroys life of violent contusion & daily of a week or a more he was brought to Hospital  
all extent of injury none of first disordered the nervous system no operation was performed  
vitality and he died. 2. He said he would not survive 3. He said this had been removed before 4. He said  
issue of case when Dr. V. S. B. assured me he saw a similar case of mortification well this encouraged me  
apt small spot as large as a shilling which actually discharged blood 6. The fracture condensed was  
then was given haemorrhage, physician kept a tourniquet on limb which helped to obstruct circulation 7. of given  
antiseptic fracture his leg not moving in him, he bled down venous in neighborhood of fracture  
by no means a certain precursor of mortification but it is always a signal to be on our guard, mortification commenced  
and a potent took place of the died. some of worst cases we meet with in practice are those inter-  
vening between 8. sent to Warsaw I thought there crept in she was placed in bed 9. great emaciation of system  
a tremor 10. considerable blood was found effused above & below knee, in cavity of joint 11. if it had  
appeared in a temperate subject life might have been saved not probably ankylosis of knee joint by timely treatment  
system reacted & recovered. 12. Intense cold is a very common cause, frostbitten toes fingers mortify & frost  
line of separation fully marked & amputated <sup>removed</sup> leg, the skill of surgeon is shown by saving a limb  
in amputating 14. sitting near fire heat thus steadily exerted on parts of debilitated. 15. a degree of pres-  
sure & debilitated causes mortification & sloughing, long continued pressure apt hence on pressure  
in chronic cases good to use for hip when lying on one side 16. ossification of arteries is



A patient in almshouse, <sup>(see 4)</sup> Higgins affect not paraplegia hectic fever & dyspnea externally <sup>(see 4)</sup> her  
throat was tumid but not pointy. she appeared to be in great distress & her violent dyspnea & complicated  
disorder, upon examining her fauces with a spoon I discovered a prominent tumefaction & fluctuating,  
having guarded my bistoury I punctured it & pus flowed copiously & was well formed, this  
relieved her for a few days, when another puncture was made & relieved her for a few hrs but she  
died. examination post mortem from front to back cervical vertebrae was diseased, entering the  
<sup>anal</sup> cavity of those bones between 4 & 6, (right side) of the chest was filled with pus & 8 dorsal to 11<sup>th</sup>  
lumbar vertebrae pus was in contact with bone, passing up <sup>and down communicating with abscess of neck</sup> theca to cervical vertebrae,  
when you find sore throat, dyspnoea & that complaint of thinness of larynx & symptoms  
that you can not explain with tumefaction, you may fear that there is a deep seated abscess  
or one lying near skin, but in all such cases I consider myself justified in cutting down  
upon anterior part of <sup>just prominent not off tumour</sup> throat to see & know cause of symptoms.

In erysipelas Abscess forms and pus travels to a considerable extent, if not timely prevented for with  
early & free incisions are the mid to evacuate dead cells membrane after which bandages may be ap-  
plied to approximate (part Dr. Ross, Wilson, and myself were attending Dr. Cleaver, he had run a thorn  
in his finger, slight inflammation succeeded which at length reached his axilla & glands became painful  
he had been subject to hepatitis we employed a slight treatment for some time & thought it pro-  
bable that an abscess was forming he recovered the symptoms but in a short time his symptoms became  
worse attended with delirium, we supported him with a generous diet, & discovered on his side some degree  
of erysipelas which we opened and a large quantity of matter was discharged. he recovered.

### Paronychia (see No 6 of my notes)

This commences with an uneasy sensation on part of finger affected & in a short time pain, the  
finger becomes round & full with throbbing which increases giving patient very little rest at night  
this will suppurate travel up hand & find its way to joints before patient is aware of the  
progress of disease. Poultices cannet, blisters may suit answer very well, immerse the finger

6 in hot leg is of benefit it acts as a counter irritant, my plan is to make a free incision thro' thea & evacuate pus not no pus follows (scalpel yet simple incision has given great relief by relieving distended vessels of their load bandages on the part may relieve the vessels Dr Perkins has used the caustic alkali not benefit I should apply in the early stage whr thr was a dread of instruments this diss is not confined to finger. A person had paronychia in / plane of hand, & applied to Dr. Physic Water for relief / pus he br evacuated in small quantities thro' small orifices bt. considerable gully still remained. Dr. W. made a free incision, ulcer healed bt the hand became ridged, wh was thought by patient friends to be fault of Dr. W.; in these cases you should state to the patients / effect that is likely to ensue from nature of diss; when diss is seated in / hand great caution is necessary in making incision as bld vessels are numerous & large. I have seen paronychia seated under the fascia off thigh (here) symptoms are deep seated pain greatly refered to rheumatism wh might be treated as such by a person unacquainted w<sup>th</sup> the disease to great suffering of patient, if you hr any idea of deep seated fluctuation whr a fascia binds down parts, plunge a lancet in or carefully dissect down w<sup>th</sup> scalpel. even if you are in an error no injury can result & operation.

#### Onychia. Maligna (7)

A patient w<sup>th</sup> this diss has considerable inflammation round finger nail of a red colour discharging sanies, nail itself is of a blk colour, if suffered to spread it may enoad / w<sup>th</sup> limbs making it necessary to amputate, Dr. Park has proposed a plan of totum wh as far as my experience goes I can recommend m. of mercury & s of Zinc a mist & dusted on part, I used the w<sup>th</sup> success in a case whr diss commenced at toe & involved part of foot

#### Burns & Scalds (8)

The extent is more dangerous thro' depth whn 1/2 of surface of body is burned or scalded the patient always dies this is a general rule (accordg to my experience) immddly after accident the system

becomes very much prostrated / skin cold, pulse low, thirst very great, this last is very unfavorable one Rinds, to allay pain opiate are called for in much larger doses than common where whey, or wine to stimulate / system as a topical application. Kentish's ointment is superior to any other basilicon & spts of turpentine aa; whr / cloths of / anterior part of / body the fire and the flame ascend it may be inhaled and afflict an injury on / larynx & trachea. Case of a Germ. distiller / head of / kettle blew off and he was involved in / liquor  $\frac{3}{4}$  of / body was scalded, he being of a vigorous constitution his system reacted, he on 10<sup>th</sup> day when / cloughs began to excrete he sunk. in / neighborhood of this city a brick kiln burst a quantity of hot sand was thrown among / workmen employed near it; the foreman suffered <sup>extensively</sup> severely, but his vigorous constitution and temperate habits I thought he might survive but he sunk in 12 hrs. Ulcers & burns do not heal as ulcers & other causes, fungus excrescences are apt to shoot & the surface of the cicatrix has a peculiar disposition to contract, it is always proper when bras are situated near large joints to use the splint & bandage early.

### Ulcers (9)

I shall give you a few general remarks on ulcers & for a more minute account refer you to the books on surgery. we are taught to rely more on / operations of / system to give relief in these obstinate cases of disease. I celebrated Heister shed great light on Physiol. logical surgery if I may be allowed / expression. Suppose a foul ulcer is presented to you for treatment you 1<sup>st</sup> put / patient to bed in a posture to rest / limb diseased, apply poultices till it is properly cleansed, then fr. / raddle cure adhesive strips to approximate / parts (is an important step) and bandages, healthy granulations will spring up & the ulcer heal, if you have a patient able to bear it purging blood & a low diet will be proper, if / ulcer is indolent give a nourishing diet & tonics, I have seen a change of action produced by sprinkling powder bark on / ulcer & healing it up I have at times used bistoury in old & indolent ulcers not happy effect results after ulcer heals / cicatrix is peculiarly liable to ulcerate again. Case A poor woman in the almshouse who's constitution broken down by disease & habits had an extensive ulcer in the neighborhood of the anus originally & venous infection, it healed and left a number of

excrescences wth w<sup>ch</sup> very troublesome, she wished them removed, I applied a ligature to one of the lowest not aware of irremediability of new formed parts, and entire slough came away and I had a frightful ulcer to extend w<sup>th</sup> in this broken down constitution it happily healed & she happily escaped death & the doctor. this w<sup>th</sup> many of my errors I state for your improvement.

A form of disease which I have observed often & very <sup>is</sup> Caruncle (see 3 of my notes) Another  
 I of malignant <sup>caruncle of my throat</sup> <sup>which I have seen in the throat</sup> <sup>very painful</sup> distinctly circumscribed very pink, of a dark red colour, it may appear on any part of body but is most commonly met w<sup>th</sup> on neck & child's blade it w<sup>ch</sup> commonly attacks the of impure habits but it is <sup>not</sup> <sup>very</sup> <sup>in</sup> <sup>the</sup> <sup>mouth</sup> <sup>and</sup> <sup>temperate</sup>, an inexperienced observer might suppose it w<sup>ch</sup> a common boil it differs & it in being elevated w<sup>th</sup> that pointy w<sup>ch</sup> is observed in a boil, cause of lumpiness is deep seated & none of it is much elevated above common level of skin, pain is of a peculiar kind, the patient comparing it to / burning sensation caused by a coal of fire, as it proceeds / elevation increases & pain is more severe for several days, cellular membrane becomes disorganized, dead cells membrane grow rise to a great deal of irritation, patient is sensible of a change by difference of kind of pain w<sup>ch</sup> is caused by action of / abraded casts off this offredy mass, small vesicles <sup>are</sup> <sup>not</sup> <sup>a</sup> <sup>of</sup> <sup>a</sup> <sup>dark</sup> <sup>or</sup> <sup>liver</sup> <sup>color</sup> filled w<sup>th</sup> w<sup>th</sup> an irritative, sanious, form upon its surface, these open and small sinusses appear in their situation, the tumor w<sup>ch</sup> w<sup>ch</sup> in / being hard and firm becomes softer & by pressure pus may be discharged <sup>thru</sup> <sup>the</sup> <sup>openings</sup> w<sup>ch</sup> grow larger & run into each other make an orifice & discharge, (core) dead cells membrane forming / diaphragm, we have now an ulcer forming healthy pus granulations spring up and it heals kindly, this is / course of / diaphragm under proper treatment Remedies true are necessary to support / system & opiates to allay pain, instead of an abstinence diet not debilitating, opening w<sup>th</sup> wine & brandy, porter &c. should be used freely & if the bowels are engaged open them by gentle purges. Case A gentleman of temperate habits & vigorous constitution porten go more relief than any other remedy, in early part of my practice I met w<sup>th</sup> a poor patient w<sup>th</sup> a highly inflamed tumor of prominent surface I used extract freely w<sup>th</sup> any adontze, leeches w<sup>ch</sup> w<sup>ch</sup> applied but it still increased.

I called Dr. Physic in consultation I told Dr. I had not bled, bleed myself do not a  
loss of blood, he ordered nourishing diet & tonics and he soon recovered, to allay pain  
use of opials, keep bowels open, giving tucks not a nourishing diet constitutes best proc  
ie, local applications blisters, in this we have a distinguishing mark carbuncle & erysipelas as  
they arrest progress of latter, but in carbuncle they only relieve the pain, they are the  
applied only to the central part of (tumefaction), many think it does spread further after the applic  
tion, they have relined in some instances in my practice in a case under my care after the  
blisters had run on 24 hrs I went to remove it (patient entreated that I would let it remain.  
cultures of flasse & by tea spoon of laudanum this tends to promote sloughy process. It is  
large as a dollar Dr. Phys. & myself were called to see a case under a <sup>man of</sup> respectable practitioner, the  
man had been afflicted w<sup>th</sup> intermittent & attended physician had given him calomel wh<sup>ch</sup> was  
thought to be cause of his suffering by phisps. wh<sup>ch</sup> mid him uneasy, swelling had commenced  
at angle of lower maxilla extending some distance on either side, his respiration was  
somewhat affected, an incision was mid abt 4 inches V. passage of dead cellular membrane  
sloughs came away & it healed leaving a scar, wh<sup>ch</sup> was covered by his whiskers & shaved.

Noemorrhage V. nose (see page 19 of my notes)

In a lady subject to hemory benefit was derived from snuff (powdered root of geranium  
maculatum, I have been in habit of using aleppo galls & gum arabic powder & as  
as a snuff, but this means fail and you are obliged to plug up (nostrils & anteriorly  
and posteriorly pass a sponge attached to a string, one part of string to pass out of nose  
& other (mouth so that it may be pulled away at any moment. a practitioner  
who had been in habit of plugging up (nostrils of gentian as usual paper (string thro' (nose  
was suddenly called to see his patient, he found him dead, upon dissection it was discovered  
that plug had slipped into larynx causing suffocation. send string is a necessary evil.

Extracting tonsil gland

A wire shld be used that has some firmness yet soft enough to yield, the care to keep (canula  
fixed whilst securing wire for parts may tear for this purpose direct the patient to  
keep it firmly between his teeth & 12 or 24 hrs will suffice to let it remain

10 The dead part will slough away in 2 or 3 days. in disengaging the wire you may find some difficulty, if / noos does not widen sufficiently a handle of a small spoon introduced into the mouth and passed against / wire may assist to open it then cut the wire & bring it away.

### Frontal Sinuses (see p 18 of my notes)

Are subject to inflammation & supuration I have met w<sup>th</sup> several cases one who patient had several attacks in one year / matter w<sup>ld</sup> collect & be discharged fr<sup>om</sup> nose

### Pumping out the Stomach

A long stilet curved so as to fix / point of / tube fr<sup>om</sup> posterior nares fauces sh<sup>ld</sup> be used and a white basin to put / contents in.

### Hectic fever (10)

Ulcers, both int<sup>er</sup>nal & ext<sup>er</sup>nal <sup>diss</sup> / parts be are / causes of this disease it is frequently / leading point in caus<sup>ing</sup> surgeons to perform operations when there is no necessity in really for taking such harsh measures for cure of / for. but / bone & periosteum been diss and former diss irritat<sup>es</sup> / system, dead cells in brain or muscle produces less effects than car-tilage or bone. a great difference exists in diff<sup>er</sup>ent persons as to facility w<sup>th</sup> w<sup>h</sup> they may be attack<sup>ed</sup> w<sup>th</sup> this for. in some a small abscess will produce it. in others it requires an extensive derangement of parts. I had a sp<sup>irit</sup> / of a scrupulous constitution w<sup>h</sup> / vesicle & serotum w<sup>re</sup> extensively diss. hectic & mortification had commenced, he w<sup>as</sup> nothing but amputation of / w<sup>h</sup>l diss sh<sup>ld</sup> give any relief this w<sup>as</sup> done he recovered & became a stout & vigorous man. / most prominent symptoms are frequent chills coming on at regular or irregular intervals w<sup>th</sup> frequent flushes of heat w<sup>th</sup> a peculiar circumscribed flush on / cheeks, after / chill & for perspiration commences & is somewhat profuse w<sup>th</sup> these diarrhoea in / latter stage not a decline of / system. a peculiar pulse beating 100 or 120 in a minute the myocula of Dr Rush, deplet<sup>ing</sup> measures to reduce this pulse w<sup>ld</sup> be productive of no benefit b<sup>ut</sup> only hasten / fatal issue, Remove if possible / local diss caus<sup>ing</sup> / for be it by amputation w<sup>h</sup> must not be performed unless there is absolute necessity for it when hectic continues w<sup>as</sup> away / patient and no progress is made in / cure of / local diss then I am till then you may resort to amputation. I have seen it continue 1 / month / system bearing up against it

and nature finally affectg a cure. in a case of dis of knee joint continuing for some months / cartilage was removed & ankylosis took place preserving a useful deformed limb wher arises w<sup>th</sup> local symptoms I have found tonics useful also a change of air.

### Wounds (II)

May be defined a breach of continuity in soft parts, I shall divide them into incised, contused, and lacerated / first are / most simple and require / most simple treatment, / wound is to be washed not a soft sponge & worn w<sup>th</sup> approximate sides by adhesive strips & a roller. lymph is thrown out a bound of union the pain 3 or 4 days, (dressing may be removed). Contused wounds, have adhesion inflamed may be tried, but requires attention as haemorrhage may the place of inflammatory symptoms arise constitutional remedies may be used, they are peculiarly liable to bring on constitutional irritation. Punctured wounds, these may involve vital organs, they quickly require simple treatment R<sup>es</sup> / part at rest, wher they occur in joints they are to be treated not a good deal of care. Case A taylor boy had a punctured wound of / knee joint caused by a pen knife. it excited little attention at first, but in / night his sufferings were severe, inflammation had commenced, constitutional symptoms <sup>were</sup> high in the state he was then in / Relief and relieved by ankylosis. Case of J Watson removed a wound w<sup>th</sup> a cleaver on / side of knee w<sup>th</sup> passing thro' / marked high inflammatory action came on he was placed at rest w<sup>th</sup> / limb in a carved splint, wound repeated bleedg w<sup>th</sup> strict anti phlogistic plan was pursued & he recovered w<sup>th</sup> ankylosis. Mr Hunt of Derby w<sup>th</sup> work w<sup>th</sup> drawg knife opened / cavity of / knee joint, / synov. fluid escaped, in w<sup>th</sup> hrs inflammation commenced, high symptoms. for / limb much enlarged, by a proper plan of treatment slight ankylosis only the place & he recovered not only a slight impediment in his gait. you may meet w<sup>th</sup> cases wher this high inflammatory action the p<sup>ts</sup> and / surgeon are not subdued it by / most ridged means, / limb must then excise to save / patient a man had punctured / cavity of / knee joint & sent / me as I was going to / country, sent him to Dr Haartoorn / limb was kept at rest adhoive strips approximated / sides of / wound a pledget of soft lint & a collar completed dressings. it healed in a few days, a cancer doctor wished to dress it w<sup>th</sup> a pledget of lint & spts of turpentine. but he refused. a lady going to the baths prep fell on her knees on an elbow in a basket a needle w<sup>th</sup> was in some part of / clothes was pushed into / cartilaginous portion of / knee a little above / patella



destroyed w<sup>th</sup> an extensive portion of soft parts torn asunder, he may conclude that the limb is supposed to remain it will not be able to undergo ulcerative process & sup-  
 ply parts blow w<sup>ch</sup> w<sup>d</sup> be had have amputation as soon as possible, if any injury involves  
 joint injuring the bony structure tho it is also necessary to amputate. The left  
 and is apt to be shattered by a gun in act of loading, blowing rocks are frequent causes of the  
 and case at Morris mill near Frankford a girl play<sup>g</sup> near one of wheels w<sup>ch</sup> was caught  
 cloths / miller seeing something unusual in matter in motion of wheel & hearing her  
 cries ran immediately to shut down the flood gate <sup>he then went to look & found</sup> / girl  
 entangled in wheel I was called in consult a sister physician I find a crushed foot of leg it  
 looked like beef bone pounded fine by cleaver of butcher, the lower portion of tibia protruded  
 w<sup>ch</sup> w<sup>d</sup> / integuments stretched & very tense, thigh bone on each side was broken, the arteries  
 were safe and as she was young & had a vigorous constitution I divided the tense integuments & replaced the  
 bone, placed limb in a flexed position, kept her perfectly at rest, reacted the place, infinitely more  
 high rose the run bled copiously, purg<sup>s</sup> was not admissible in her situation. everything went  
 on to our satisfaction, a number of pieces of bone exfoliated the leg was shorter than opposite.  
 I mention this case that you may recollect system is capable of bearing a great deal in a vigorous  
 habit of constitution. In some cases we are obliged to amputate, & I have to regret that in some  
 not performing it & saving the patient I mortify and death, but I would still recommend  
 you not to condemn a limb too hastily when vessels are safe. Ought amputation be per-  
 formed b<sup>4</sup> system reacts at all? I say no it sh<sup>d</sup> not, when system has received an injury, the  
 pulse is low, system prostrated / skin cold & in this situation we sh<sup>d</sup> go large doses of opiates  
 to comfort patient & if he is much prostrated other stimulants, such as wine, today & this will  
 perhaps enable him to rise abt it & system reacts, then amputation will be proper, this  
 is not a settled rule among surgeons, especially Army surgeons, as they consider it best to am-  
 putate immediately & perhaps tho it may be proper. case a brewer in my neighborhood att<sup>d</sup> / will  
 carelessly go. a wedge a kick to put the mill right. his foot was drawn by injury & his leg was  
 much injured, bones broken & soft parts torn when I saw him his pulse was not the distinguished  
 skin cold, system prostrated very much I gave him an opiate & he was carried to Hospital

I proposed amputation this he at first rejected but afterwards acceded to, his system was till prostrate we got him under a diffusable stimulant, he was taken to operating room student was <sup>waiting</sup> ready and every thing ready & favourable, when his confessor entered room after this interview he was again much prostrated, we adjourned until 6<sup>30</sup> in evening finally reaction had not taken place, we concluded to operate but his pulse at radius was not to be felt we again delayed operation and he died next day, this will give some idea of influence of imagination, no danger otherwise might not be apprehended.

### Gun Shot wounds (15)

When they involve cavities & large vessels they run more speedily fatal, case of a man hunting for rabbits stooping down not aware of gun on his breast, a trigger caught trigger of content entered his chest emphysema not of pressure the pts he soon died. scut bone is involved. A wk was shoot, I nail was shot in / arm / os humeri was much shattered, radial artery was injured, violent inflammation the place of <sup>brachial artery</sup> radial artery was laid bare, I was afraid artery would stop by guarding his system constituted myself he recovered & had a useful limb but after I saw him digging more holes. When only slight reaction the place we have here (for here is much dug) a systematic diss of system (also come away a stiffness of back comes on which soon results in tetanus. case A young man in Jersey received a gun shot wound in the axilla his system reacted & tetanus came on (spasms were very severe this was in summer season, at this season tetanus is more common in tropical climates / surgeon employs leeches & general diet to keep it off by keeping system elevated though hot weather is most favourable to tetanus cold nothing will not prevent its occurrence. A gentleman firing a gun it burst, a piece flew off & buried itself in muscles of arm it was old wither yet tetanus came on & he died. case A F. gentleman thrown by his horse & his scrotum injured it sloughed every thing bare. it had a favorable appearance yet tetanus coming on he died. Tetanus (und 15)

Symptoms, stiffness of spine uneasiness at chest, jaws closed, when you wish to ascertain this sympt direct patient to put out his tongue, so as not to give him suspicion of your object. Remedies Dr Rush applied a blister whole length of spine. Dr Harlehorn applied caustic to spine. A physician a fellow student of mine has applied actual cautery

the spine not success, he dips cotton in spots of turpentine applies this to spine & lights it  
at a candle, spasms cease upon operation of fire. A loss of sensibility in a wound  
a sure indication that tissue is near. A boy that fell under my notice was relieved by  
application of caustic to spine, cold bath is recommended. There are cases very much  
resembling tetanus and might easily be mistaken for it by an inexperienced observer this is  
not to be hysteria I was called in consultation not a gentleman who said he had cured it  
by bleeding & opiate. The patient now seen by us, was affected not every symptom of tetanus  
I went up stairs & found all tetanic symptoms had vanished & the patient labouring under  
hysteria if I had not seen this case now should have had a notion case cured by simple  
treatment soundly in our ears

### Contusion. (11)

you may frequently meet not serious injuries from contusions with any appearance externally  
to indicate it. These cases generally prove fatal in a short time & injury. Case A load cart  
run over body of a little girl extent of injury forbid all hopes of recovery. Case of a boy run over  
by a waggon & rammed on by horses, he was very badly hurt, very prostrated I applied a mixture  
of plaster to his extremities but reached not the place completely & he sunk. Dissection showed his  
liver shattered into a thousand pieces many of which were detached, his abdomen was filled with blood  
2 ribs were fractured & his heart contused. A person working at a brewery had a cask to fall  
on his abdomen he walked some distance home. I was called to see him not dying, no external marks  
to show injury, he vomited black matter until to the end of 4 days he soon died. Case of man  
sleeping in a house that he formerly was a store, rising one night to pass his urine he came to one  
of doors used for getting in goods (being dull of sight) he walked out & fell with his abdomen  
across a fence I saw him & state of bladder attracted my attention I passed catheter  
& only a small quantity of urine flowed & this mixed with blood, he died. Dissection showed the  
fundulus of bladder ruptured & urine effused into cavity of abdomen which caused peritoneal  
inflammation. In Canada a man was kicked by a horse he had no marks of external injury, was in  
a low prostrate condition & died. we did not obtain permission to examine him but I have no  
doubt his liver was fractured. At Bristol I was called in consultation with Dr Phillips to a  
passenger in mail stage his cloak caught in jumping out of stage this threw him under  
wheel, he walked back to Bristol about 1/4 of mile he became sick and vomited black matter

16 his pulse merely perceptible <sup>after considerable</sup> ~~yet in a short time~~ his system reacted & by depletory means he recovered. Being confined one afternoon by indisposition I heard a noise in my parlor on going down I found a child who had been run over by a dray he lay in my parlor during that of last day reacted the place one or two blds was sufficient for his recovery. I was called to see a man, who riding near hospital, who had been kicked by a horse, people urged to let him bleed freely but I resisted, and waited till reacted the place who died in a few hours in full force I then bled him repeatedly, they were now afraid that he would be bled to death he recovered. case a woman fell across a chain on her abdomen, reacted the place in a few hours. she complained of some pain in right side of child-bon pressure) but by small bldg & a strict antiphlogistic plan she recovered. I believe she had (or sympt) a fracture of liver but fortunately she did not give us an opportunity to examine. A man was brought to hospital run over by a cart containing 500 weights / bones of pelvis was broken his system was reacted, but he gradually grew better until entire recovery the place. You will not meet no appearance of severe injury when <sup>in reality</sup> no injury exists. A Cavil's son run over by a cart was soon after able to run about. I suppose the wheel struck a stone before passing over him & this was reason why no injury was received. case of Son of J. Louthwell run over his carriage no injury resulted. Severe contusions often occur & falling, saving in of banks in such cases you should early examine state of bladder & pass catheter if necessary

### Fractures II

I consider the practice of ascertaining that peculiar sensation, creeping, as very injurious young subjects are liable to a particular form of fracture of bones & if you are not acquainted with this you might be very much at a loss as there is a firmness in limb. I have met with this accident repeatedly especially in radius, it is to be repeated treated on same principles as other fractures unless early treated bones become permanent in this situation. I have endeavored to replace this accident kind it does not crack. I was called in consultation to see a little girl with her arm in this situation, several days had elapsed before I saw her but she had injury. tight bandages are not placed on limb, in a state of inflammation they become tighter as it swells and sphacelus is result, they should be loosely applied first and narrowly watch. Fractures in children should be (best) treated with plaster of paris

In children (extension & center extension are not so much required as in adults. In fractures  
 sprains given to allay irritation are of benefit & will over balance / dread of inflammation. Fractures  
 in drunkards, tremulous muscle indicates approach of mania potior. in such cases the  
 early resort to lac a pascoidea & opium are necessary but it not be well to employ stimuli  
 such as tinct Amara, potior & large dose of opium at night and when once free & symptoms  
 you may taper down untill you entirely withdraw / stimuli. A waggoner 90 mls &  
 Child. fell & his waggon / fore wheel passed over his leg / horses stopped whl / whl us on his leg till  
 man wh wh him hitch / horses to / hind part of / waggon & drove it off of his leg it was then  
 up in a number of <sup>at</sup> splints light by a physician to whom he applied. in this situation he rode to this city & who  
 for accident his leg being very much exposed to ~~the~~ neglect on / away yet he done well & had a single bad  
 symptom, this illustrates / powers of some constitutions. In a fracture in a constitution opposite to / one above  
 I met not a frequent pulse, & vespiration around / fracture, but by a tonic course of treatment & removing  
 all dressings so as to allow free circulation he recovered, in a <sup>small limb</sup> Case Dr Dorsey & my self were in  
 consultation a y man riding in a gig, the horse running away, jumped out broke both his legs at  
 Abia, he had a companion & both not excited by stimuli vesicles coming a dark blood serum appeared near  
 fracture, tonic treatment was used not all its force not effect his habits nor bad. You will not  
 meet w<sup>t</sup> vesicles around / fractr, tho cutting a light ~~the~~ coloured serum least danger, tho cutting a dark  
 & bloody serum are vry dangerous when you meet w<sup>t</sup> it all splints & bndgs must be remove. & limb  
 kept at rest and elevated to favour return of vns bld & retard flow of arterial.

Fractures of neck of the neck of the Femur. 18

Most frequent in the advanced in years, is met occasion by a slight fall on floor by walking on ice or  
 you may by the hold off foot in age persons discover whether bone is injured or there is only a contusion, the  
 foot not eminently is turned outwards. & got pain is felt if you attempt to bring it to its natural and  
 position, this is not always case foot is not turned inwards, in dissep such a fracture it is necessary  
 to apply splints of Hutchinson or Haversham early in / case of G Dillwyn who fell on ice and  
 fracture / neck of femur tho no shifting of limb & foot was in its natrl positn, he did stand  
 on / sound foot & throw / other backwrd & forwrd bt nor gained / power of movg it by / muscles. in  
 this situation he lived sevrl months & at length died of cholera, here / head of bone was fractured & a

detached & floating in joint. Dr Neel had a case of an old lady who fell on her hips / foot was in a rotten position & splints were applied & kept on many months bfr reunion the place, she can use her leg a little, (process is generally slow; by allowing time they will heal but not the leg a little shortened.

### Compound Fractures 19

The first object of surgeon when called to this accident is to reduce it if possible to a simple fracture by 1<sup>st</sup> placing it in a proper position and then closing / external wound by applying adhesive strips, be sure / get violence, laceration & loss of substance will prevent him & effects this, when fracture is comminuted trust to system to repair the injury wch it will do by throwing off all offending parts.

### Necrosis 20

This dis commences w<sup>th</sup> deep seated pain, inflam<sup>t</sup> of soft parts, constitutional irrita<sup>n</sup> comes on & the fever is not very high, treatment in its first stages shld be active Bleeding, purging, blistering & by these means you may in some cases prevent entire death of bone. failure here / tumefaction & pain increases opening are made in bone & sinuses / soft parts corresponding w<sup>th</sup> them / go equal / matter dead portion / bone aft / inflam<sup>t</sup> sy<sup>st</sup>em has subsided. when fever is extinct you g. for / bloody (Hætic) wch if not purged will wear down / patient greatly, let sine sinuses will clear ext<sup>er</sup> local dis w<sup>th</sup> little constitutional effect & for such patients you may rest / treat on / operation of / system, particularly when / dis is seated in / femur & the bone & operation shld not be performed except when / system calls aloud V assistance of / patient able to sink w<sup>th</sup> hectic, in / tibia bone - only cover by skin & cellular membrane of / operation and / operation may be easily performed. a lad in / Hospital had no system of muscles reduced by / written of dis seated in / tibia Dr Hartshorn cut th<sup>rough</sup> / skin, operated on / bone w<sup>th</sup> a trephine, removed / sequestrum & / lad recovered.

### Scurfula 21

This dis often produces an alteration in / bony structure. A boy V N T had dis tibia & this cause partial anchylosis at / kn joint had then place and / bone so much altered in its structure that amputation was thought safest wch was accordingly done and / bone was reduced to / state of a honey comb or like a piece of sponge.

from  
Lues Venerea

The simplest form of secondary syphilis is the venereal ophthalmia & copper colored blotches on skin. The highest state is ulceration of throat, (highest state is when bony structure is involved in some the nodes may be seen just formed in others in a state of ulceration, generally on tibia, bones of nose are frequently attacked by disease & ulcerate, in this way septum may be entirely destroyed.

### Diseases of the Joints

These diseases are very apt to occur in scrofulous subjects.

#### Morbus Coxarius 23

This disease originates from various causes not all scrofula into action, injury of part is a very common cause, such it arises without any apparent cause. In hip joint it connects with laminae of side affected they will complain equally as much of hip knee as of hip. one fact is remarkable inguinal glands are enlarged and indurated, this stage lasts in some a long time when on this symptom be in others you soon have for considerable pain & distress. if you lay child on his back & pelvis straight you find the diseased limb longer than opposite one. a person unaware of this fact might suppose limb dislocated. I have seen leg of a man elongated 1 or 1½ inch. I met not an instance of a lady who died of consumption in hectic fever, there was a tumor on anterior part of her thigh extending some distance down the limb I thought I could perceive a shape fluctuating, I upon this ground and are inclined incision upon principle of Abney's flatus escape not a small similar to that of intestines, opening would not eat after some days a quantity of pus was discharged and at times a portion of flatus similar to first discharge. Coates for carried her off upon examination we find head of bone diseased, a whole communicating with cavity of pelvis, rectum was found ulcerated & a whole communicating with cavity of pelvis, through which flatus had been discharged into pelvis abscess. morbid adhesions were found in pelvic cavity. If any relief can be given to the patient it is in first stage when is inflammatory. suspend all motion of joint by putting on a curved splint neatly adjusted to parts & padded, then give of topical bleedings purgatives low diet vegetable, leeching is a topical mode of depletion very beneficial in this disease, blisters & setons are also useful in the proper time be in first stage when your object is to decrease inflammation they are of little benefit, in J. Bapmeon's son when limb was elongated we employed no splints, kept him at rest as much as possible using repeat bleedings, purgatives & low vegetable diet he recovered when you have reason to believe that inflammatory symptoms have subsided you may allow gentle exercise.

gradually moving it untill perfect use of limb is <sup>regaind</sup> acquird I understand Abernethy & recommends his patients to walk about untill this is pain or not, this practice I can not recommend, or approve

### Anchylorisis 24

This is divided into true & false / latter by gradual use of joint and time may be overcome wither this produces pain or not it must be perceived in, when you find cartilago of joints destroyed and anchylorisis about to the place you must attend to position of limb as in leg you preserve position, in elbow & fingers flexed these positions being most useful to nature

### Luxations 25

In shldr joint ligaments of acs lacerated the whl head has passed, & may be lodged either in the axilla or under pectoral muscle. in a case in Dispensary considerable force had been applied to reduce luxation w<sup>th</sup> effect, when by placing one hand in axilla & w<sup>th</sup> other making <sup>ext</sup> ~~distention~~ reduced it by my own efforts. if bone has been displd a considerable time your exertions shld be gradual so as to exhaust counter effects of irritat muscles when surgeon is called to luxate and meets w<sup>th</sup> a considerable opposition & muscular rigidity of joints. there are many methods of trying to overcome it s<sup>ps</sup> V.S. it has been used w<sup>th</sup> advantage, such your efforts at reduction w<sup>th</sup> in syncope the place in aged & feeble this method may destroy remaining strength. Emetic tartar has been given for this purpose, this apprs to me not to be most useful plan to effect our purpose Tobacco injections have been proposed, but this my <sup>injury</sup> ~~pro~~ <sup>very</sup> ~~very~~ bone has been a long time out of socket / adhesions w<sup>th</sup> any form, may be very firm and considerable force be employed to break them up. I think bounds shld be set to employment of force Dr Physic has introduced practice of intoxicating patient this may be attended w<sup>th</sup> some danger particularly those who have not been accustomed to use liquor, but not w<sup>th</sup>standg its objections I wld prefer it to V.S. In a stout & vigorous man bleedng was employed to a considerable extent of great force w<sup>th</sup> effect, poor man submitted to operation, pullies were employed and got force used, to break up adhesions / limb was work in different directions. when a sudden crack was heard w<sup>th</sup> appeared to be in arm, all further efforts were immediately abandoned. Thus our opinion on the head of bone was fractured.

### Injuries of the head from External Violence 26

Sometimes eventually results in mania which continues the life a some of a potter's friend was insane

from this cause, had epileptic fits in one of wh he died.

### Concussion of the brain

consciousness is the immediate effect of an accident of this kind, duration of wh is different in different persons. in some it is protracted a considerable time (face is pallid, skin cold, pulse feeble and almost entirely gone and respiration defective, system rising from this state nausea & vomiting on. reaction continues and rises out to a high degree. treatment. in prostrated condition till I have some symptoms of reaction, then apply stimulents to extremities, when reaction has then place & S. accords to circumstances, topical bleedg of phlegm, cold applicatns to head & if for still continues to rise, a blister to head.

### Compression of the brain from fractured cranium

In ~~some~~ this accident symptoms shew themselves immediately after it has occurred in some few cases there will not be lease symptom to indicate injury for sm hrs pulse is slow, throbbing of temporal arteries, stupor, repeated convulsions, pupil of eye dilated, stertorous breathing. I have met w<sup>th</sup> cases whr pupil was not dilated. a case in consultation w<sup>th</sup> Dr Gallahan, breathing low, pulse slow, and all sympt of compression except dilatation, but a few moments b<sup>4</sup> death pupils became dilated. A mulattoe girl in front st fell & I stung into w<sup>th</sup> not I found her comatose, stertorous breathing, pulse feeble, pupil morbidly contracted. Dr Thos was called in consultation an incision was made over fracture w<sup>th</sup> pieces of bone were removed but she died we found b<sup>4</sup> vessels throbbing w<sup>th</sup> substance of brain <sup>non</sup> lacerated & present appearance of a completely cont<sup>acted</sup> part, when brain is injured by a club or the like is more prospect of recovery than when occasioned by a fall. case of a boy of S. D. Anderson fell in hold of a ship among ballast his system much prostrated, stertorous breathing convulsions Dr Holshorn operated, the away w<sup>th</sup> pieces of bone he appeared to be much relieved w<sup>th</sup> days passed in this way then dura mater became of a dark colour & appeared to have disposed to slough & matter and purg<sup>s</sup> were carried to a considerable extent convulsions & hemiplegia came on & he died.

### Frenzy Cerebri

Is of rare occurrence I once saw a cure under name of Dr Dorsey in this affectn, it is of a dark colour & sloughs. Cont<sup>acted</sup> Coup, a blow on one side will not injure other side of part in 1810 a

female maniac in hospital reduced very low by a diarrhoea, in night jumped out off window stairs, she was soon to bed in a state of insensibility a tumor was observed on left side of her head, pupils feeble, pupils dilated, when tumor was pressed she was uneasy we thought she did not survive, therefore decline any surgical interference. She died upon examination we find fracture, a piece of bone was projected thru dura mater, on opposite side there was effusion between dura & pia mater. and a long spicula of bone (excrecence & drove into (or exanum) pointing inwards as sharp as a needle no doubt this produced her mania. There is frequently got difficulty in distinguishing between compression and concussion. I have seen got injuries of head with either slow pulse or pupils dilated case. Thomas Foster of Arch St Ferry was early in morning engaged at (ship a beam connected with (steamer boat) fell and struck him on back of his head, he was bled before I saw him got cotton of scalp, coma, but when spoke to in a loud voice he would answer, his head was shaved & cold water applied in a few hours we saw him again he was still in a state of stupor, respiration good pupils but little dilated, but in a few hours his pupils became fully dilated, now we operated, found (back part of skull broken into a number of pieces & dura mater wounded, we did not remove all pieces of bone as it would have laid 1/3 of head bare (but raised them up) & drove it superficially in a few hours he died. You will meet not cases where compression will arise & effusion of blood within (cavity) exanum. I was called in to consult with Dr. Neale in (case) of a S. boy who fell in hold of a ship he complained of injury done his arm his head appeared well but in a few hours stupor came on a slow pulse, throbbing of arteries the V.S. purgative was used mercury so as to open his mouth, a blister to the scalp and he recovered. Dr. Maron called me to see a young man who had received a blow on head, he was in a state of stupor, pupils feeble, pupils somewhat dilated, but contracted on holding a strong light near them injury not frontal & temporal bones appeared, an incision was made down to bones but external table only seen appeared injured he died we were not permitted to make an examination. Case Jones killed by Murphree was struck by an axe handle, with a blow on a half mile after injury. Dr. Davis seen him found him in a mangled state he bled him and left a student not directing to send him if any change the place, he was intoxicated at time injury was received at daylight (student sent for Dr. F. he found symptoms of compression. Dr. Hewson now saw him & Dr. Davis in time to see Dr. F. him, (dura mater was depressed 2 inches below bone by a mass of coagulated blood which was removed by finger (cavity was soon filled up with a fresh supply of blood, we found lateral sinus torn & bone (patient was now in articulo mortis. pupils feeble, nails blue and at 12 o'clock he died.

case of Mr Luke an Irish Merchant wh was opp'd to hr fallen thro hatch way in his store  
 Dr Physick is of opinion tht wounds of dura mater prov fatal. Dr Emelin seen a grt number of wounds  
 of dura mater in Paris at its capitalatn all of wh prov fatal. Dr Dowsy had a case tht recoverd  
 Dr Mason call'd me to see a girl wh fell v a cherry tree on a sharp stone, fractur'd her skull a piece  
 of her brain was (left sticking on stone) taken away wth a piece of depressed bone, no sign of compres-  
 sion on I seen her & found her vry sensible, gave up all thgt of an operatn, inflmtn was prin-  
 ciply thng the dread 150 J of bld was then bowls kept open cold wth applic'd to head, and confin'd  
 in a dark room <sup>1/2 way</sup> she recoverd. Case not Dr Harlow & Harris a boy wth thrown v a horse, skull  
 fractur'd no sign of compresion was treat'd as last case and he recoverd. An application of  
 Mutton Rellis fell thro m fence & felt no fracture evident nor sign of compresion, left him wth  
 orders to hr his bowls open next morning a mild deg of stupor he arriv'd, was bld to syncope in after-  
 noon he was in complete state of stupor his purgation was operat'd, & he became sensible untill  
 his death, mercury was us'd to excite absorptn, bldg to subdue inflmtn. pulse born feeble & frequent  
 convulsions, death. exam'n Post mortem shew'd the intoul tble driven upon brain extoul only  
 slightly depressed sharp edge of intoul had wound dura mater. He has been desput'd by Surgeons  
 whether an operatn shld be perform'd in every case of depressed bone or not. Dr Winter had a patient wth a  
 fracture extendg v occiput to frontal bone tht recoverd wth trephining. I think it is always safest to  
 operate, whv thv is depress'd bone. if you are call'd qu't early, whv thv is a comminut'd fracture  
 remove all detach'd portions of bone Dr Duffield had a case of a capt'n injur'd by a blow v a block  
 no urgent sign at first bt he died shortly after in convulsions. Aft trephining a patient if you find  
 brain pulsatz it is vry feble / contrary of this is unfeble, whv thv is bld btwn pia & dura  
 mater some surgeons advise making a puncture to let it out if bld has had time to coagulate this  
 operatn wld be vry hazardous bt if bld is still fluid you are (might be) protect'd in resortg  
 to this operatn. Dr Physick believ's it shld not be done. Abernethy relates a case whv one of his  
 students was present at time of <sup>an</sup> accident at horse raising, bld was affus'd under dura mater  
 he punctur'd dura mater left bld escape & man recoverd. I questn mo for an operatn wld be  
 justifiable as in case of Jones I wld be guid'd by extat of injury, and if fracture exist'd & he had  
 taken no m'r liquor since injury I should operate. I was call'd by Dr Junney to see  
 boy wh he fell v a pile of boards.

dugos symptoms did not come on until some time after accident, then he became dull stupor superven-  
 stem of feet cold pulse slow, pupil of right eye dilated of left natural I made an incision on left side  
 scraped bone it bled freely, and one on oppst side it bled but not so freely (accordg to Dr. - <sup>the</sup> method of de-  
 termining place of <sup>effusion</sup> compression) being no certainty as to place of effusion we put it off until morning, before  
 that arrived he died upon opening head a copious effusion of blood was found on left side. / brain very much pulsed  
 and yet the skull not be effused under dura mater. Case: an apprentice of G. Gane. M. M. Mullier fell  
 down a door in 3 story into st where hoisted up some goods, his face cold pale contracted, stertor &  
 comatose, & this state he rose a little his language was incoherent, he vomited words of (scalp I dilated /  
 largest of found a small fracture not old depression, used trephine the out a portion of bone, delirium was  
 was great, / dur. mater quiescent, thought the might be effused but there was none, put synapisms to his  
 feet, / pulse in one wrist not perceptible, motion of thyroid cartilage considerable when we looked upon as  
 unmovable in a short time we saw him again. I thought I saw slight pulsation in brain, in 10 hrs, died.  
 there was no effusion of blood, soon as of cereb. was found in different parts of brain, / concussion of brain  
 must have been so violent that it never regained its power. Whence came this quantity of cereb. it was not  
 result of inflammation. for there was no reaction.

### Purging out stomach.

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When laudanum or any fluid poison has been taken to except best way of evacuating it is by a tube washing it out  
 with a syringe until it comes out clear, tube is very apt to lodge at posterior fauces a stilet well  
 venously this, patient makes an effort to vomit when tube passes posterior nares, & it may pass into  
 trachea, it is a general error in surgeons to continue so long in evacuating stomach, and delay too long  
 (use of stimulants to rouse system & its disposition to sink, these stimuli should be force & narcotic  
 principle such as belladonna, ginger tea &c and if pulse sinks alcoholic stimulants. case a young woman  
 some months & city the 23 laudanum, when I seen her she had been told by / phys in attendance. Fortified  
 tube I syringed out stomach she became sensible I left her room to the a dish of tea on my  
 return was astonished at / great change that had then place pulse strong, able, not delirium I advised belladonna  
 but she died in a short time. Case I was called in / night to see a woman / mother of a family  
 who had then taken some stupor was manifest she resisted my efforts to evacuate poison  
 I endeavored to recall her love of life on a most tender point direct her attention to her children

who wr then in bed w<sup>th</sup> her she then consented to live I introduced tube & withdrew (land num  
extreme debility ensued Not alk. Brandy toddy, ginger tea & synapismos to her extremals wr employd  
he recovered. In cases when stomach is filled w<sup>th</sup> food thr will be some difely in consequence of food  
lling up (apertures in tube. cases &c

The Parotid Gland.

belein en't be extract. A lady hd a tumor situated on the gland wh tumor hd 2 partially been  
removed I was at length applied to & removed it over vessels w<sup>th</sup> cut & then up immediately in surgeons  
a removal w<sup>th</sup> a tumor wld hv suppos they hd removed (parotid gland). The duct is sut w<sup>th</sup> and  
is a fistulous opening thro wh saliva flows upon cheeks especly when eating. Sir Astley Cooper takes a  
curved needle armed w<sup>th</sup> a skin of silk passes it into sinuss thr cheek this is sufd to remain w<sup>th</sup>  
to makes an opening of sufficient size when it is withdrawn & external opening could not ad have plotr  
as to prevent saliva flowing externally this plan has bn successfl, it is simple & one I shld adopt.

Polypus in the Nares — 28

is sut situated in anterior nares patients my labour under it fr years w<sup>th</sup> <sup>extreme</sup> such inconvenience & it  
except in respirati. it will be proper to know w<sup>th</sup> they be movable or not you may know this by examining  
when patient makes a forcible inspi- or expirator, if it is movable can be pulled away by a pair of forceps  
they are sut vry tender and come away in pieces if a small piece of bone come away not pedicle it is  
a proof of that you hv detached wh diss part. the hemorrhag is quvly slight. in polypus of posterior  
nares you hv got difely of breath, bt can see nothing pass yr finger into (with beyond (uvula & far fr  
septum navis if thr be polypus you can readily feel it. case of a slave V.N. Carol aged 18 yrs admitted  
into hospital his humane master hd exhausted the skill of the prv of country & spent 800 dls upon  
him, as a last resort sent him to Philadelphia, tumor nrvly filled up larynx. his breath <sup>no</sup> <sup>the nose</sup> <sup>was</sup>  
his deglutiti difely & swelling under chin I passed a wire round tumor by a double canula  
was afraid when it sloughd lest it wld fall, block up passage & <sup>gave the child charge to watch carefully</sup> <sup>respirati</sup>. In a few days  
I was sent for in haste (tumor hd fallen a little in consequence of wire hng cut potty through it  
Dr Dorsey & Hawkshorn soon met me, in attempty to draw wire tighter it broke, difely of breathy  
becm allarmg. Dr Hawkshorn proposd 2 tubes w<sup>th</sup> a piece of tape <sup>no huge dila canula bt no injury</sup> the passed round tumor <sup>and</sup> pulled it out,  
the soft palate was divided to give mr room <sup>never saw respirati polypus contracted w<sup>th</sup> life</sup> tapes w<sup>th</sup> passed round tumor tied and w<sup>th</sup> a sedent  
hook I drew it away, his respirati bcm moditly easy. recovered & returned to his humane master's  
a concluded attempt to take place if tumor wasnt extirpated in a short time & evrything was p<sup>ro</sup>posed insteedy to perform tracheotomy  
did not succeed in pulling any

There are soft cavities lined by mucous membrane & throwing the fluids into nose wh are subject to  
 polypus, Antrom hyemora is a frequent seat of dis it is generally soft in this situation and adheres all round  
 to parietis of antrium, Turner gradually increas in size, by its pressure causes bones the  
 absorbed & fungus tumor accipies cheek forming a cauliflower excrescence, they spread in every  
 direction get into cavity of mouth, orbit of eye & protrude the organ, find the way into brain pro-  
 ducing pressr and destruction, in early part of my studies I saw a lady w<sup>th</sup> an enormous tumor  
 wh had destroy<sup>d</sup> bones of face and a tumor of an size project into cavity of mouth, she died. I saw  
 a gentleman w<sup>th</sup> polypus he had <sup>protruded</sup> project eye, I declined operatz, Dr Wistar consented in <sup>protruded</sup> proptety of not  
 operatz. B<sup>t</sup> patient urged operatz the profound & I clear nostrils B<sup>t</sup> shortly after his return to countr  
 he died w<sup>th</sup> all sympt of compress brain. Dr Gaultey sent a y lady to me. I immediately notice her irreg-  
 lar features and protuberant eye. A tumor in her mouth, I declined operating and she still  
 lives (w<sup>th</sup> yrs ago seeing her) <sup>she later died in this city 1825</sup> I am informed, Case of a few months stand eye w<sup>th</sup> protuberant, tumor  
 in mouth, alveolar & palatine process w<sup>re</sup> absorbed I operated thro her mouth & found an  
 extensive porta of bone had been absorb<sup>d</sup> it w<sup>as</sup> necessary to plug cavity w<sup>th</sup> sponge, severe inflmt came  
 B<sup>t</sup> w<sup>as</sup> subdued by regors depletion I now removed sponge & found her voice w<sup>as</sup> nearly destroy<sup>d</sup>. (dis-  
 return mens rapidly & in a few w<sup>th</sup> she died. When you see protuberant eye you may calculate  
 danger the great, thin plate of bone b<sup>etw</sup> eye & brain w<sup>ill</sup> explain this. A gentleman had a polypus on  
 (septum navium w<sup>th</sup> its anterior part), it w<sup>as</sup> abt size of hd appearance of a raspberry I rem-  
 -ov<sup>d</sup> it and applied caustic th<sup>at</sup> I might remove evry portn wh knife did at reach, B<sup>t</sup> it return<sup>d</sup>  
 again <sup>removed</sup> appl<sup>d</sup> caustic liberally he died shortly aft of fvr. Dr Trowbridge w<sup>as</sup> successf in 2 instances  
 in removing dis<sup>s</sup> of antrom by means of a trephine. It is said th<sup>at</sup> a case has been successf at Baltim<sup>r</sup>  
 of a y man whom I seen & advis<sup>d</sup> against operatz. I have been inform<sup>d</sup> th<sup>at</sup> Dr Jamson w<sup>as</sup> operator.  
 this dis<sup>s</sup> the place on hor maxillary bone. Dr W<sup>th</sup> in case of a blk boy removed tumor, scraped bone  
 and applied caustic (dis<sup>s</sup> w<sup>as</sup> completely eradicated). Ann Newson had a tumor extend<sup>d</sup> & angle of jaw  
 to symphysis of chin 3 inches broad & I operatz, th<sup>at</sup> away all dis<sup>s</sup> portn, hemorrh<sup>age</sup> w<sup>as</sup> got  
 sponges had been appl<sup>d</sup> to stop this loss, mouth w<sup>as</sup> w<sup>et</sup> w<sup>th</sup> album & acct of lead, when sponges  
 w<sup>re</sup> removed hemorrh<sup>age</sup> agn return<sup>d</sup> and w<sup>as</sup> agn stopp<sup>d</sup>. bark & brandy w<sup>re</sup> giv<sup>n</sup> to enable her to  
 recruit her health she died in a few w<sup>th</sup> aft removal of dis<sup>s</sup>. Dr Dedrick of Kentucky removed  
 porta of bone <sup>not gone</sup> to wh dis<sup>s</sup> w<sup>as</sup> attach<sup>d</sup>. bone now unites firmly. his wish<sup>er</sup> w<sup>as</sup> brought over to hide the

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reformity. Dr. Mott of N.Y. is in favor of operation. I hope none of my pupils will rashly operate  
until you have made yourselves thoroughly acquainted w<sup>th</sup> all that has been written on (subject) having  
experience myself I can not recommend operation

### Calculus Concretions in glandular bodies

founder of P. University first called attention of physicians to this class, especially in (concretions); they  
are very disagreeable factor of breath a young man & country came to me w<sup>th</sup> a tumor  
over parotid gland it was firm and unyielding, a sinus was found, on introducing my finger  
I found a hard body I made an incision over tumor, found calculus concretions and  
removed them. a gentleman came to me w<sup>th</sup> an ulcer in his neck, on opening sinus I found cal-  
culus which was removed and ulcer healed. A gentleman & wife came to this city w<sup>th</sup> an indurated  
spot over parotid gland Dr. Physick was consulted, (map) appeared the deep seated & fixed we en-  
deavored by prepulse to bring nearer surface but I never met with him since.

### Foreign bodies in the Nostrils

pebbles, beads, beans are frequently introduced by children into nose, you will find it advantage-  
ous than by surprise and introduce a bent probe so as to get it to posterior part then bring it down  
& gladly had an obstructor in one nostril which had existed for a long time and factor of his breath  
was very great I examined obstructed nostril my probe came in contact w<sup>th</sup> a hard body which I removed  
this was considerable calculus matter having a bead & its nucleus

Inflammation of the tongue is generally followed by abscess  
they are relieved generally by evacuating matter making a puncture in most elevated part.

### Gangrene of the mouth

From effects of mercury and other causes. Core of Edouard Adcock. whose tongue would always swell on  
enormously, & gums not affected. a black woman who used mercury for cure of itch had her tongue affected in  
the manner when you observe in a patient who has taken mercury, instead of a flow of saliva  
a dry mouth, instead of peculiar factor of mere a cadaverous breath, thickened & glossy cheeks,  
sordes on teeth you may draw sphaclatus. A little girl taken mercury in intermittent  
form, had thick & glossy cheeks, cadaverous breath, dark spot on cheek about size of a dollar spha-  
clatus extended, sphaclatus extended unusually & one cheek to the other she died. core a little girl

28 in Alms house the condition of cheek one slough off at Dr Harlan succeeded in healing it completely  
There is a diss very much resembling this occurring with use of mercury. I have seen a child with  
a thick glossy cheek an ill condition ulcer on inside of mouth, gave bark liberally and used for  
- long wash <sup>of S. Zine & Honey</sup> I have seen an ulcer of tonsil gland getting all signs of glossy cheek  
and one in pharynx <sup>Time myrrine aa ʒss</sup> case of a young girl with glossy cheek and ulcer inside of mouth, bark  
& husband's tooth gum, (above wash used) (subject of Zine is principle ingredient, mouth should be washed  
out frequently a sense of constriction & burning is left after washing (must do it always rubs off sore he healed  
case of female attended by Dr Wistar of Suffolk earliest habit considerable mercury he has used not out  
producing salivator Dr Wistar would frequently say during its administration remember it is J. Herts mercurial ointment,  
salivator came on. Slough of cheek let the record.

### Foreign bodies in the Larynx

Death is sometimes suddenly induced by foreign bodies lodged in larynx inducing spasm. I am now  
attending Mr Dr Ritchie a little girl who eats some things almonds got something into larynx, cough ensued  
very violent & soon time but has abated a difficulty of breathing has since came on. A woman of N.J. had a pin  
bar lodged in larynx brought up by sneezing, this is a good practical hint. Operation of tracheotomy  
has been performed. It should not be performed with great caution substance passes up & down every  
time (partial breaths & difficulty is experienced in getting it out. several have operated with success. You  
should be well aware that a foreign body has passed into trachea. I attend a patient with a gentleman who  
wishes to operate but I advised to delay it, one symptom being absent, difficulty of breathing, is proved to be  
mental agitation not some hysterical affection. A child whilst playing with a cent in its mouth, he went  
suddenly to sleep into throat, situated in front of epiglottis. I then with my probe and elevated cent. then  
with my fingers drew it away. Dr Wistar used to relate case of a female who when drinking threw  
her head back with a kind of spasmodic motion. Upon examining her epiglottis was found the partly  
destroyed. she was led intemperately to this to prevent her food & drink & pass into larynx, this may  
be cause of symptoms in Hydrophobia & points out mode of relief the dread of water may arise  
& their being consequence of morbid state of parts & fluids pass into larynx cause strangulation.  
Dr Physick has proposed tracheotomy in these cases.

Foreign bodies in the Oesophagus. An apprentice boy had a peach stone down in — had difficulty of breathing pulling in my fingers for purpose of pulling it out caused vomiting, by which it was discharged. if pass low down & substance is soft you may push it down by probing. small doses of tart emetic may give relief. if they are pieces of bone or angular substances you must introduce forceps and take them away. fish bones are frequently lodged near larynx arches you may take them out by a pair of forceps.

### Stricture of the Oesophagus

Signatures. difficulty of ~~swallowing~~ deglutition (patient refuses to swallow ring & stomach & obstructed passage of food. evacuations are common. discharges a thick mucus & brown cough & vomiting, this mucus I have referred to same cause as the mucus of stricture of stomach. in other words, this stricture places stomach in an irritable state, same as stricture of urethra causes bladder to be irritable. When I was a student a woman died w<sup>th</sup> stricture of Oesophagus to all appearance & inanition. examination post mortem showed Oesophagus so constricted that a probe passed w<sup>th</sup> difficulty. passing bougie is best ~~manner~~ remedy. I should prefer flexible tube if there was any difficulty. an old gentleman near this city was in habit of passing bougie 2 a year. (time is extended after every operation. it is now 2 yrs since it has been passed. I relieve a gentleman very much by passing bougie once only.

### Deafness

Is occasionally caused by (meatus being filled w<sup>th</sup> ear wax, this may be relieved by the use of wax by a small scoop a core in (almost house I succeeded in curing by this means

### Wounds of the Throat

These most easily occur in those unfortunate and insane persons who attempt suicide people are not acquainted w<sup>th</sup> structure of these parts believing generally that a wound of the parts is mortal. In treatment of these cases I rely more upon position than any other means, keep head steady by proper bandages, (practice of stitching is very improper, there is a risk in applying adhesive straps all over wound immediately after accident, principal danger in such cases is hemorrhage, when carotids are divided inevitable death is result, when one is divided there is same danger if surgeon is not on spot at time of its division

but small vessels are divided & carotids not injured, leaving very the place to an alarming degree in the case, / higher incision (greater is difficulty in treatment & our drugs / result, in in genl our arteries being situated in that position. But small vessels being divided syncope comes on a coagula is found w<sup>h</sup> surgeon venues, & if wound is closed alarming symptoms come on, threaten life of patient. Case a man to whom I was called, had had an incision (as he called it) thyroid cartilage into larynx. Dr. Physick seen him w<sup>h</sup> me he proposed a tube sh<sup>d</sup> be introduced into his throat bandages to keep his head in a proper condition & leave cure to nature on 2<sup>d</sup> day th<sup>o</sup> w<sup>as</sup> every sign of spasmodic croop and in one of the paroxysms he died. Another case the incision high up / wound was closed by stitches by direction of a medical man w<sup>h</sup> seen him previously to my upon entering room my attention was immediately directed to his labious respiratory he was coughing up bld. I immediately w<sup>th</sup> all possible haste took away stitches b<sup>t</sup> in fact of doing w<sup>h</sup> <sup>the patient made a considerable effort and</sup> he died. It is important to the up every vessel before closing a wound of this kind w<sup>h</sup>l sits in Dr. Wallen's office he was called to see a young woman w<sup>h</sup> had an incision thro<sup>at</sup> trachea down to oesophagus below cartilago, th<sup>o</sup> had been a considerable flow of bld, b<sup>t</sup> syncope came on stop it, full  $\frac{1}{2}$  hr elapsed before dressing was applied, no return of hemorrhage in this time. Mania still continued. w<sup>h</sup> is not common, reason returning after incision is made we applied adhesive strips. To observe laborious respiratory w<sup>th</sup> some convulsive motion, just as I was about to leave patient. I tore off dressing as soon as possible & blood gushed out in a full stream & an artery of some size, <sup>when</sup> she was immediately relieved of these threatening sympt, we took <sup>it</sup> artery, and wait some time before applying dressings a slow hæmaturgia came on and in a few weeks wore out patient in some of these cases wound will heal except a small sinus w<sup>h</sup> will continue open a long time, and gradually wear out patient. a tube is to be introduced directly after accident to convey food & drink into the stomach case of a sailor in R. Hospital, epiglottis divided at its base by incision & it rose up w<sup>th</sup> the tongue a tube was introduced thro<sup>at</sup> w<sup>h</sup> he wore his nourishment in 7 or 10 days severe hæmorrhage came on here I supposed knif had entered artery and slough had just came away, Dr. Hartshorn being in house plunged a needle into / part of took up vessel, respiratory was as perfect as ever for a considerable time he was nourished thro<sup>at</sup> tube, & it was supposed at time he died he did tell his different kinds of food th<sup>at</sup> was given him & the improvement on his stomach.

You may understand ~~that~~ posture of head is the your main dependance, ~~the~~ syncope may for a time suspend hemorrhage, & it may be renewed afterwards, ~~that~~ you must not apply final dressings untill every vessel hath been taken up and you are pretty well assured there is no danger from hemorrhage.

### Diseases of the Bloodvessels

When an artery is divided it retracts its extremities within the sheath of cellular membrane, this being drawn in stretch (perhaps) lacerated presents a ragged surface <sup>whereby</sup> the blood flows, is impeded in its course & these shreds of cellular tissue entangle blood and it forms a coagula as soon as a person faints, this shuts up the mouth of the artery, who retracts the out coagible lymph & the artery is completely closed, the portion of artery divided up to the latter branch ceases to carry blood becomes a mere cord & finally absorbs & retracts the latter branches enlarge & keep up circulation. Compression often succeeds in arresting the flow of blood from an artery ligatures are most common means employed they should be drawn tight enough to cut the internal coat of an artery if they are not there is great risque of secondary hemorrhage but we are forced to the use of a mass of flesh within the ligature, to the use of several arteries in one ligature in either case the internal coat is not cut, in a patient where there is considerable loss of blood syncope may come on & arrest the flow of blood for some time. I once amputated the arm of a man who had shattered it in a most shocking manner by the fury of a gun after operation vessels bled freely, circulation was carried on with such force, that it seemed impossible a vessel could be divided and not bleed, under this impression I slung the dressings and I mean pulled to bed, the night secondary hemorrhage came on, dressings were removed coagulated blood adhered to every part firmly & great pain was given by the removal after cleaning away the <sup>coagulated</sup> vessels (which was a large one) was taken up he died well. case of an elderly lady Dr. Winter had operated on, he took out breast & gland in axilla, arteries were then up and dressings applied. in a few hrs secondary hemorrhage the place and dressings were removed blood vessel then up and dressings reapplied. the best way to avoid secondary hemorrhage is to wait a considerable time before you apply your dressings. I am now in the habit of waiting for 2 hours? before after the operation & giving some opium before it. If I have not time myself, I leave some medical man for an hour or two during this time circulation is restored to its accustomed vigor & every vessel of any size (which is not then up) will spring & not be taken up. but you must not wait too long. you will be frequently be called to persons who have been wounded, where pressure has been applied with effect to stop the hemorrhage.

32. In such cases it is common to apply / dressings, w<sup>th</sup> removg / coagula, this coagula acts as a sponge  
permittg bld to ooze out thro' it, in such case remov coagula, you distinguish vessel by a jet of bld  
thru the it up. But bld oozes out of a number of small orifices or vessels wh can nt be thru up by a lister  
flower dusted on / part will do good. The best applicatin is gallo pulv. of gum aa dusted on / part a,  
a surgeon shld nt touch a part unless he can go thro' w<sup>th</sup> operatn, as it places / life of his patient  
in danger. <sup>instance</sup> a y. man performing an operatn been infused abt / middle of it L. Bartsh. was called in  
consultatn and they succeed in removg tumor of commandg / hemorrhage.

Diseases of the Arteries want of power in coats of an artery to th on / adhere instantly  
an intempest man Lim — came under / care of Dr. W<sup>th</sup>, his ankle was dislocated, / bone commi-  
nated, / artery was divided, Dr. W<sup>th</sup> amputatd leg, / arteries were secured, / stumps were dressed in 2 or 3 days  
hemorrhg the place of / femoral artery was thru up as high in / groin as we cld get at it, hemorrhg soon  
came on agn at / stump wh was soon commandg fortunately for / patient thr was sufficient vitality in  
artery at / place whr / last ligtr was applied. / cause of failure in / first operatn was a loss of power  
in / coats of / artery to th on / adhere instantly. Ossification of coats of an artery are frequently met  
with, mo so in lbrg persons than in others, if amputn is performed / arteries are find in this state  
a ligatur will nt stop hemorrhg if you succeed in commandg it for a short time, abt time of  
separatn of / ligature ulceratn will th place of / secondary hemorrhg the place be / consequent it is very  
apt to terminate in mortification, I cld hv come under my observatn bth of wh terminate  
in mortification, if any ~~circumstance~~ happens to ask you believe th an artery is ossified, you  
feel / radial artery if th is ossified / inference is good th others are also when a tourniquet is  
applied to an artery ossified, you will be unable to compress it completely if still aft compressn  
you still feel / artery pulsats below you may conclud / artery is ossified, this done we decide  
th amputatn shld nt be performed. in a compound fracture whr / arteries are lacerated and  
other sev injury done to / part amputatn must be performed nt w<sup>th</sup> standg / bony arteries, in  
these cases th up considrble flesh w<sup>th</sup> bldg vessels, / chance of / patients recoverg will be grtr  
than if they were thru up singly. I hv sevrl times been in consultn whr / artery has been in /  
above situatn and I have seen / lower extremities in mortificn from this cause.

Aneurism consist in dilatation of an artery. by writers it is divid into true & false & descriptive  
 I wh I refer you to thes, they may be pke in in vrs situations. on extorials they are managble, in  
 some other they are not in some cases they are constitnt. Dr Physick has operat first on one thigh  
 then on other of same patient. in a case under care of Dr Wm a spiritus cure was affect of an aneurism  
 of femoral artery. Dr Cole had a case that was curd by bands it was situat under soleus muscle. Symptom  
 of aneurismal thrill this is difficult to describe it is like puty one finger near one end of a musicle  
 string & stretch, w<sup>t</sup> other this sign is nt always the depend on, I wh mut w<sup>t</sup> it in for & when for  
 subrided & it disappears in cury this disease by ligature it must be applied on sound part of  
 artery some distance abv tumor nothing must be done to tumor it will be removd by absorbents  
 when they are situat in a cavity bone is absorbed & tumor protrudes. Priscilla Litan a chd wo-  
 man had aneurism of aorta a ptn of sternum was absorbed and tumor projectd thry it in form  
 of a sugar loaf 4 inchs & sternum exam<sup>n</sup> post mortem, mak<sup>g</sup> an incision into tumor thir was a  
 solid mass of bld almost as strong as muscle fiber, edges of sternum whr it had protrud, was  
 rough & jagged, heart was dislodg'd by tumor it was an aneurism of aorta, diagnosis in case of aneurism  
 shld be very correct bfr you operate when they are situat in cavity of thorax I am nt satisfid tht  
 operatn is safe. Dr Greffitts sent me a note wshg me to examine a body wh was said to have an an-  
 eurism of carotid by Dr Physick & dorsey the reason of nt operatg was she had a short neck, tumor was  
 situat low down & they apprd they wold hav to go deep to get at a sound part of artery. I open'd thorax  
 and found droopy of pericardium, found carotid passg under tumor & in a healthy state, on exam<sup>n</sup>  
 I find tumor was right lobe of thyroid enlargd, this had deceivd so many expernced persons & myself  
 untill I came under it, in trace healthy artery, purpl pulsatu & genrl disturbc of circulatn in  
 droopy of pericardium. you must all be aware of artery communicatg its pulsatu to tumor  
 it had a thrill like aneurismal. In a case I seen int<sup>r</sup> vire. I thgt tht was aneurism of <sup>brachial</sup> ~~front~~  
 artery, tht was aneurismal thrill bt it provd to be an abscess

Poplital Aneurism this is frequently caus'd w<sup>t</sup> rheumatism, aneurism may be pke bfr attentn  
 is drawn to it manifest, (nervs in tht situatn may becom, distnd stretch'd or comprsd, and  
 cause tht anomalous sign), sint pke will tell you he got rheumatism & tht it had <sup>now</sup> ~~begin~~  
 to swell I wh mut w<sup>t</sup> severl cases in this way, and have found them

clearly mark aneurism, Dr Perkins & myself wt called to our in keeper in 2<sup>nd</sup> St who supposed he had rheumatism & that it had begun to swell upon examinatin we find, pulsation of aneurism of posterior tibial had ceased, Morbificata commenced & in a short time carried him off. A man in Hosp. had a tumor in thigh it was not well mark, we did not tell with it no aneurism or fungus hematomas, he was very anxious smthg shld be done to it, we concluded to operate, & told him if it shld prove to be aneurism we wld have to tk off limb, he said he wld submit to any thing <sup>else</sup> but not to amputatin, a tourniquet however was applied & (dissected <sup>a small hole was made into the tumor</sup> carefully down on (tumor) we found it the popliteal aneurism, here we were in a delicate situation, we eneld to tk up artery & placd a watch over him fr night bt it was not kept up & he died & secondary hemorrhage. Never will I be concerned in an operatin of this kind agn wth tk off limb (moment an aneurismal sack is opened, and never operate unless patient has given his consent to operatin of amputatin shld it be thought necessary. In one case wth I did not see (patient wld not consent to amputatin & surgeon amputatd wth his consent, (as hemorrhage wld have caused his death) he wd violent resistance and died on table turning on one side & saying there you have killed me.

Aneurisms from Anastomosis Females refer these to some accident happenng to mother durg her pregnancy. certainly they are frequently found in children at birth, these anastomosing vessels are found elevated a little above skin and of a red colour, it we compress it bld will retreat, remove pressure & bld will return, by careful examinatin we are enabled to trace one or more arteries running to it, a child was brought to me & R's point, tumor no size of an egg situated on head, sevrl branches of occipital artery old be trace running into it, I operated accord to J. Bell by cuttng out tumor since this case I have repeatedly extracted such tumors & taken up vessels. in a case wth Dr Hartshorne & myself we called anastomosis was situated on mouth & vein inside some distance Dr H used ligature not success. a little girl to whom I was called by Dr James wth tumor situated on the tibia, passed a needle armed wth a dble ligatur thrg tumor & tied it on each side so as to tk in wth dble map ligature sloughd off and it healed kindly. I perform this operatin on a child of Dr Hewson's not success. In a case of a large tumor btwn eyes on forehead I succeed in removing it wth ligature, this did not have been removed wth knife wth greatly endangerg life of child. and I give

it to you as a fixed principle to employ ligature in all cases of aneurism Panastamosis or  
 Nervi Materni, but you will find arteries of a large size. I intend in first case that comes under  
 my notice to keep ligature repeatedly going all round the tumor. Dr Physick has operated  
 by tying artery supplying tumor, that case it wld be abortive, wldnt preserve in addition be  
 of service? Anty Cooper has proposed preserve in the cases of large Nervi Materni. But a spontaneous  
 cure is affected

### Sub cutaneous Aneurism from Anastamosis

This is seated under skin & supplied w<sup>th</sup> bld & deep seated artery, it has less intensity of colour & feels like  
 a doughy mass, first is red & situated in skin. a boy was brought to western entry by his father  
 a medel man, had a tumor on his groin rising up among abdominal muscles in center of tumor  
 in center of tumor there was a slight discoloration, full of bld vessels, but upon strict examination I  
 could not find a single vessel that supplied it w<sup>th</sup> bld. I supposed at once it was supplied w<sup>th</sup> deep seated  
 vessels. Soon after this a paper was published by Wardrop on this subject he lost first patient he oper-  
 ated on & hemorrhage.

### Diseased Veins

Often abound w<sup>th</sup> knots, often ulcerate, if opened profuse hemorrhages ensue, but suppuration succeeds such  
 wounds. Case of P Williams veins of his leg were varicose. I tied a ligature round vena saphena  
 above knee, as recommended by Sir C. Bowne, <sup>of the pleura & prostate</sup> but was disappointed in result, inflant came on, terminated  
 in ulceration by a free incision matter was evacuated & he recovered. bandages I believe are an ex-  
 cellent mode of treatment spermatic veins sometimes become varicose, this state of vessels is often confused w<sup>th</sup>  
 hernia, Dr Hartshorn cuts off a portion of vein so as to cut off all communication, this operation has  
 succeeded very well. suppuration of veins about the place the of upper extremities are very troublesome.  
 Mr Wignell tragedian had been bled in arm inflant was excited by exertion at table w<sup>th</sup> his friends & wine  
 which caused his death examination post mortem was found in cavity of vein opposite had not been touched.  
 erysipelas inflant but follows bldg in consequence of using arm improperly after operation.

Ruptured Veins a mulatto man in Almshouse w<sup>th</sup> a swelling of ham & leg, pulse frequent, opio  
 was given him and poultice was applied to part, he stated he had been struck in ham by boom  
 of ship abt 2 yrs previously he had again injured it whilst bathing, sign of hectic for many the  
 appearance I made a small puncture in leg

a small portion of blk bld followd, I applyd adhesive strps to kep it closed / not day it was still open dischrg  
black bld of a thin offensive matter, I now find a lgr puncture I find / lmb load w<sup>th</sup> grumous bld, upon  
consulttn it was thought necessary to amputate / next day was appointed for / operation, / not day was  
lupacatn had commind, / weather was moist & sultry, / lightning flashy and <sup>sharp peals of</sup> thunder rolling seemd  
to threaten destruction wh added to / melancholy of scene, we concluded to operate <sup>amputate</sup> provided he consented wh  
informed of his situatn. When I informed him, in as mild & soothing a manner as possible, he replied Dr  
it must be done or I die. it was done & he died in less an hour.

## Cancer

This class generally commences by moveable tumor in a glandular part, the sort it has possession of a part  
not glandular it is justly dreadd by females of / surgeon. Of the Mammæ This class is more frequent is  
more frequent in middle life and persons of some age than in younger persons, the young are not  
entirely exemptd from it, it sometimes occurs in / male breast it commences w<sup>th</sup> a small tumor, moveable at  
first & in this situatn it may remain for some time, months or even years w<sup>th</sup> much inconvenience  
or pain to / patient, but more early it comes on gradually w<sup>th</sup> pain sharp & lancinating, shortly the tumor  
/ skin becomes puckered & when you attempt to move tumor you find it attached to / skin wh is of a  
dark red colour & wrinkled in this state it is considerably adomed involv<sup>g</sup> other parts, as it advances  
/ tumor increases, / skin breaks, ulcerates the place & instead of a well connected puff, you have  
an ichorous discharge of an offensive smell, pain becomes severe & hectic for frequently sets in. when  
in its advanced state / glands in / axilla become involved some / glands of / neck are affected and  
diss extends itself under / clavicle & / patient finally sinks, from severe sympt of hydrothorax such cases I  
have seen & I have seen evidently, cancers tubercles in / lungs, they can be distinguishd & purplish tubercles wh are dis  
they pass on to supuration containing a cheesy matter but cancer tubercles are striated on examining / mammae  
you may find / tumor adomg to / posterior parts in such cases it adheres to / pectoral muscle this state of it  
is unfavorable, in most cases of true cancer / skin is shrivelled and of a purplish colour, but I have seen  
cancer wh / skin was preternaturally enlarged, red, & stellated, or small spots or of a dark red color  
these are unfavorable cases. case of an elderly lady, breast red, stellated appearance, little pain she gradually wore  
out not heeling for before ulcerated the place. I have seen cases wh / skin was a granulated state of / skin

as if it cutnd grains of wheat or shot in these cases / operatn not always fails. I operated on a y subject  
 whm / tumor w<sup>s</sup> of long standy & found it compos<sup>d</sup> of hydatids. I have also seen a cyst emptied of its contents  
 th on / suppurative process & ultimately turn into cancer. I wish to impress it on yr mind that whm you find  
 tumor adhr<sup>g</sup> to pectoral muscle, or glands in / axilla enlarged or th<sup>e</sup> rough surface as if shot had been  
 received in / skin, no operatn shld be performed, those cases whm / operatn wld be likely to succeed are  
 whm / tumor is moveable / glands in / axilla of a natural size, / skin of breast free & diss<sup>d</sup> & especially  
 free & th<sup>e</sup> spots th<sup>e</sup> feel lk shot under / skin; whm whm cancer commens in / breast it is seldom move  
 th<sup>e</sup> 2 yrs bfr / glands in / axilla are affect<sup>d</sup>; but / disease returns in / scar. When you discover a movable  
 tumor it becomes a q<sup>stn</sup> wth<sup>r</sup> / whole breast shld be remov<sup>d</sup> or nt? I answer yes if / patient is past the  
 meridian of life, bt if you hv a y mother / case is diffcult, in / first case / breast is of no more use to  
 patient bt in / second it is an important gland to / mother, of wth she shld nt be deprived unless absolutely  
 necessary. In th<sup>e</sup> cases I inform / patient, it my return & only remove / diss<sup>d</sup> part, unless she request / whl  
 / worst & leave / other fr sm future operatn I have hd 2 op<sup>s</sup> of this kind in one patient does well, / other  
 diss<sup>d</sup> has returned in / glands of / opposite axilla are affected. whm you find a cancer you c<sup>n</sup> nt operate  
 on nor brk / skin, if you do / pain will be increas<sup>d</sup> & life shortnd use yr influence agnst / applicatn of  
 mostrums except some simple plaster such as Logan's breast salve prepar<sup>d</sup> of / oxide of lead case of cancer  
 on / arm — / skin w<sup>s</sup> purple, pain vry great & muscle involv<sup>d</sup> Dr. Bartolom met me in consult<sup>n</sup>  
 we adv<sup>d</sup> amputatn he wld nt consent, arsenic was applied by a medl practitioner bt it did nt stop  
 ravages of / diss<sup>d</sup>, he agn appld to me / glands in / axilla w<sup>r</sup> nw affect<sup>d</sup>. I adv<sup>d</sup> agnst / operatn. he replied  
 I have prepar<sup>d</sup> fr death, / operatn offers sm chance of relief or cure & I must hv it off it w<sup>r</sup> th<sup>e</sup> off  
 he soon aft died of sympt of Hydrothorax I believ / diss<sup>d</sup> had extend to his lungs.

### Diseases of the Spine. Curved Spine

This diss<sup>d</sup> is a series or necrosis of bone, our effort is mad to give a degree of firmness to / spine by a  
 new bony bridge. Symtoms a tottery in / walk of / child, complaints of being fatigued & slight  
 coercise these symt are early perceiv<sup>d</sup> by / mother whm call<sup>d</sup> you shld strip yr / patient naked  
 make a strict examinatin & you will not q<sup>u</sup>rrly find a curved spine, this my advise wth the  
 general health being impair<sup>d</sup>, th<sup>e</sup> smt / genl health is impair<sup>d</sup> & severe pain is felt in the  
 part. whm diss<sup>d</sup> of / spine is fairly form<sup>d</sup>, issues to / back hv done much good, / lunar caustic

at same time supportg / back w<sup>t</sup> stays. Dr Physick uses continued purging & a recumbent posture, bt / posture c<sup>an</sup> not be carried into effect, mo<sup>re</sup> especially in children in whom / dis-  
 ease frequently occurs. Fractures of Spine may occur as well as of any other bony structure  
 by a blow directly applied I've seen cervical dorsal & lumbar vertebrae fractured. if a man  
 falls & a considerable height, surgeon finds him unable to move his lower limbs they are perfectly  
 palsied, a total loss of sensibility, / muscles of / bladder & sphincter ani give way. case of a small  
 man fell down stairs total loss of sensibility so that when I applied a burning coal to one of his  
 legs he did not feel it, in these cases you sh<sup>d</sup> prevent / accumulation of too much urine in  
 / bladder by drawing it off occasionally. Pressure on spinal marrow arises & other causes  
 than fracture, in injuries of head I treat fully of lacerating vessels, of effusion & pressure  
 on / brain - on same principles an injury of spine may occur cause effusion & pressure on  
 that part. In 1819 B Parker coming home one evening whirled (in short) himself round a tree root  
 standing before his door, w<sup>th</sup> great velocity after wh he perceived a sensation of heat in / neighborhood  
 of / stomach he was bled by a neighborg practitioner, he was afflicted w<sup>th</sup> apoplexia paraplegia, he  
 was sensible of a slight touch bt did not feel a pinch, / paralysis extend<sup>d</sup> up to neck his  
 arms retain<sup>d</sup> their nat<sup>l</sup> sensibility & power he was bled occasionally, mercury freely used  
 bt fail<sup>d</sup> to produce its peculiar actn, 4 large issues were put on / vertebrae, 2 in neck &  
 2 in back lumbar vertebrae, (catheter brought away thick bloody fluid) offensive, worm  
 w<sup>th</sup> was several times inject<sup>d</sup> into / bladder, frequently he had pain in / linea alba he did not move  
 / great toe of / right foot. 48 hrs before his death we find / bladder clogg<sup>d</sup> on putting my finger into  
 the rectum I felt / bladder like a piece of dough, we now pass a catheter & inject worm w<sup>th</sup>, he  
 said he felt something give way & died in a few minutes. Examination we find urine  
 extravasated into / cavity of / abdomen, inflammation of / intestines & bladder & 2 ulcerat<sup>d</sup> openings  
 large enough for a finger to pass, (coat of / bladder thickened).  
 I shall now treat of a dis<sup>e</sup> of lower extremities / seat of wh<sup>ch</sup> has been much disputed w<sup>th</sup>er it be  
 in / brain or spinal marrow, I will leave this for others to determine. It comes on gradually  
 w<sup>th</sup> some degree of loss of power of lower extremities, spasms, irregular contractions, a jerky of  
 muscles sm<sup>th</sup>ing in / manner of St Vitus dance, at / times / loss of power is nearly  
 complete, there is generally severe palpitatio of heart. case of a healthy looking man

Case of a healthy looking man, w<sup>th</sup> loss of power of control of his lower extremities & violent palpitation of heart, he had a fracture of thigh b<sup>t</sup> certainly these affectns cld not have arisen from this cause, his intellectual faculties remained clear & sound, large caustics were applied repeatedly, internal treatment of every kind resorted to, he took nuxvomica mercury &c. I once attend a y<sup>oung</sup> man in same situation tho<sup>ugh</sup> w<sup>as</sup> in her almost a total loss of power b<sup>t</sup> at times tho<sup>ugh</sup> wld be irreg<sup>lar</sup> spasmodic actn of muscles aft she had been in this situation for sm time she fort complnd of venosibilly in her g<sup>roin</sup> toe w<sup>h</sup> gradually increas<sup>ed</sup> aft med<sup>ical</sup> assistance had b<sup>een</sup> discontinued. It is said french surgeons w<sup>ho</sup> succeed in curing this disease by a steady confinement to a recumbent position they confine their patients on their backs for 9 months by this means use of limbs gradually returns, a pillow under a dis<sup>ease</sup> of spine, yet several patients had a peculiar look abt eyes w<sup>h</sup> wld seem to indicate th<sup>at</sup> it is in head.

Diseases of the Eyes

Ophthalmia, this is g<sup>enerally</sup> known by redness &c w<sup>hen</sup> arterial actn is high blood will be required due regard not be paid to age & constitution of patient, leeches, spare diet &c aft inflmt has been reduced bleeding is adv<sup>is</sup>ed, to allay pain an opiate may be g<sup>iven</sup> w<sup>ith</sup> fear of inflammation, as local applications stimulants are not well suited in most acute ophthalmia mild washes are best, temper<sup>ature</sup> of washes to be regulated by pulse of patient, when dis<sup>ease</sup> is dec<sup>reasing</sup> patient may return gradually to light & his ordinary occupation smt it will r<sup>estore</sup> w<sup>hen</sup> or w<sup>ithin</sup> to establish a perfect cure, smt it is the perpetual blister to arm well suited to chronic cases Dr Physick says he has find as much adv<sup>antage</sup> from blister to arm as being near eye, local depletion & scarification of eye are u<sup>seful</sup>. w<sup>hen</sup> come p<sup>er</sup> low acute inflmt a blister over eye not a gauze septum to keep eye open, tart water is smt u<sup>seful</sup> as a wash w<sup>hen</sup> inflmt amounts to an eruption on skin not dry up entire dis<sup>ease</sup>. Case of a woman purulent form of dis<sup>ease</sup> she lost one eye w<sup>as</sup> cured by venesection. In gonorrhoeal inflmt unless early att<sup>ention</sup> be paid to eye it g<sup>enerally</sup> lost. Case of a tale girl sleeping w<sup>ith</sup> a y<sup>oung</sup> woman not gonorrhoea but matter convey<sup>ed</sup> to her eye, w<sup>h</sup>nt inflammation resulted by venesection, leeches

40 and blisters as far as I could put old bear. one eye no red / other no appearance of staphiloma

Suppurant Ophthalmia of Infants I have seen this dist in infants a few days old but this is a small ulceration on cornea. Treatment recommended by Dr Saunders is vigorous, leeches freely applied we must pay regard to age of child as leeches are now worst in children than in adults, mild purges, astringents should always be preceded by leeches, this is a tendency in this dist to an eversion of eye lids. I used acet of lead Sol<sup>n</sup> of copper Sol<sup>n</sup> Zinc & syring out eyes, I now perceive much benefit & scarification, but this dist terminate in ulcer of cornea, when you see an elevated part of cornea you may expect it to slough & size considerable but cicatrix on heal is comparatively small, when the slough comes away with a wash of Sol<sup>n</sup> of Zinc or acid of lead and water, coagible lymph will form when slough is abt to separate, vessels shoot into it and cause a degree of opacity but after a time lymph will be taken up by absorbent & cicatrix much smaller than could be expected.

Inflammation of the Choroid Coat This dist is rare and dangerous pupil is permanently contracted, almost obliterated and at aperture there is a small speck of lymph, exterior coats are seldom involved in <sup>this</sup> case of Mr Baldwin of Downingston he was inflamed of his eyes, antiphlogistic plan was employed in full force by his physician, eye when I saw him was dist below conjunctiva I resorted to leeches, purges, bleedings, a permanent blister to arm, it would remit, gave us hopes, gave another paroxysm with blast our prospects, I put a blister over eye not temporary benefit, he returned home no put on use of mercury by his physician, he was reduced very low, and bled liberally, his sight became more & more defective, Consulted an empiric with bust. he soon afterwards applied to me by advice of Dr Physick in consultation he used cocculus but he derived little benefit every paroxysm left him in a worse state than former until he became perfectly blind. Stopped cornea but it was too late to do good, when you see a permanently contracted pupil, speck behind cornea you may apprehend danger. If I had used stramonium in first place, adhesions of iris would not have been taken up & pupil must have been opened, puncturing of cornea is recommended by Wardrop. In some cases of ophthalmia there is a cloud state of eye.

Morbid Sensibility

Morbid Sensibility In this dis of 1 eye <sup>apptment of any</sup> there is little deviation from healthy action except that 41  
pupil is not a little contracted, vision is perfect but pain is excessive when patient uses his eyes  
and this pain continues some time after using them. See page 42

Ward of  
with pains  
to read his  
we, the two  
the only thing  
that they were  
People had to  
had a book of  
music to men

Most common  
how soon the  
The people ha  
philosophic a  
and not enter  
remain for  
from that on  
on the corner

W. lady of large fortune fond of reading had this disease it commenced  
 with pain when exposed to a glare of light she was after some time unable  
 to read her vision was perfect although if she used her eyes pain was severe  
 treated it as symptomatic and Idiopathic without relief travelling was  
 only thing that relieved her Dr. Physick says he has frequently seen such  
 & they were off the disease and became natural a young man a black in ex-  
 emb. had this disease I advised traveling which cured him, Dr. Physick  
 as a case of this kind in a gentleman. He went to Europe consulted many  
 medical men but obtained no relief - (Written by a friend ~~made~~  
 ceased John Levering 1826)

### Bimphs on the Cornea -

Most commonly met with in children they have an aversion to light the tears  
 flow down their cheeks sometimes they appear on the conjunctiva near the cornea  
 Dr. Physick had a patient a little girl with this disease he used V.S. purging &c.  
 after Cupio &c. a wash then is a light cloudiness left on the Cornea but it  
 does not interfere with vision Case of a black girl boy light cloudiness  
 remained for Years without affecting vision this cloudiness is different  
 from that depositions of thick and opaque matter Sometimes found  
 on the Cornea. A female applied to me with inflammation of her

Very little pains attending it lymph in the Anterior Chamber appeared to be removed to the  
 spasmodic and every paroxysm was succeeded by a deposition lymph  
 she was kept in a dark room & leeching & scarification but out the time  
 of a large vesic mercury employed so as to produce salivation without -  
 affecting the disease which increased until the eye was lost the disease  
 also attacked the other eye and she is now nearly blind -

### Spicks On the Cornea -

depositions of lymph can be readily removed as weak solutions  
 of nitrate of silver light by put upon the spicks with a lamellar pen with  
 hair pencils - I have known a blister to the arm do much good  
 wrapping absurgent applications into the eye -

### Cicatrix -

Sometimes persons will be alarmed at the appearance of a cicatrix  
 in the eye and wish ~~you to let them out~~ this is a popular  
 error and you must by no means comply with their request

### Iritis

Is inflammation of the eye Iris and choroid coats and is most com-  
 mune as a form of syphilis if treated as Ophthalmia the patient

reduced to the lowest ebb of life without any relief to the disease the-  
superficial vessels will be found in as natural state the pupils -  
regular and the surface of the iris unaltered and perhaps some-  
times outshining these appearances. You should enquire whether  
patient ever had the venereal in such cases mercury is my principle -  
ance sometimes it may be proper to take some blood as a palliative  
if it is a specific disease and requires a specific remedy, mercury  
Anomalous Cases -

A poor fellow with an unguis of each eye covering the whole extent of the  
cornea, mercury had been used, but the ulcers became worse at the mercury  
as pushed garlic water in small doses gradually increasing in amount  
the cornea could be seen. I used a wine of rose water as a wash -

Symple or pus in the anterior <sup>chamber</sup> of the eye -

A case in the almshouse of a man had been treated out of the house  
for inflammation of the eye he was blind largely and became much maimed  
I treated him with lotions and left the cure to nature it was absorbed  
a distinguishing mark between lymph and pus in the anterior chamber

so that lymph floats through the aqueous humor and pus falls to the bottom if this disease have continued some time the prospect of cure is very little -

### Staphylomas

this name is confined to that disease where a portion of the cornea sloughs and the humor protrudes at the sac, <sup>and sometimes</sup> in humor protrudes inward until the eyelids cannot be shut considerable irritation is kept up an inflammation in the other eye by sympathy - it becomes necessary to destroy the eye that it may collapse if have had operation in both case of the disease and the patient was rendered much comfortable

### Nebules -

this is a sort of wepsels over the eye arising from long continued inflammations or unguis case an Cloudy Gentian from the country unguis in each eye came under the care of Dr. Wister he recommended him to my care I cut out the wepsels over the cornea gradually repeated the operation every 10 days or 2 weeks then cut out the unguis his sight was restored with which he was much pleased when you see a thickiness over on the internal lids and the surface rough I would advise you

make use of the caustic Yet I strongly recommend the practice of  
 letting off the vapors in some of these cases. I have failed after a trial of all  
 the useful remedies and your patient has had the disease a long time &  
 you will often ~~reverse~~ succeed by the use of tonics and good diet

### Foreign Bodies in the eye

the small dust mote in the eye will excite inflammation & irritation  
 to put eye stons in the eye is a popular practice but they should never be  
 used erosion of the eye lid will bring the substance into view and with a  
 white handkerchief you may bring it out when dried Your patient  
 to wash the eye with cold water I have generally found the foreign substance  
 in the upper eyelid

### Wounds of the cornea

metalline particles are the most common causes of this accident  
 particles striking the cornea with some force adhere to it you first  
 fix the eye by pulling the eyelids and then with a common tooth  
 pick extract the metal lay it upon something white to satisfy your  
 patient that it has been taken away sometimes as metalline body will lay  
 in contact with the cornea a sufficient time to dry & a portion of it will  
 colour the part and although the colour remains you may have taken  
 away the offending body some irritation remaining the patient may  
 think that it has not been taken away but you must not continue to  
 operate as serious consequences may result sometimes considerable injury  
 may be done to the cornea and no injury result such as blacksmiths boy  
 got a piece of metal in his eye a person in attempting to get it out

Wm Ashmead

47. with a penknife had destroyed good portions of the cornea, no injury  
resulted the usual means to keep down inflammation were put in practice  
the eye is very liable to inflammation for which reasons we should  
operate very cautiously —

Gutta Serena  
amaniosa

that consists of a paralytic state of the retina it is to be distinguished  
-ly by the widely dilated pupil but in some of the worst cases I have  
seen the pupil was not dilated the stomach being diseased this  
affection is caused by sympathy metastasis of gout is sometimes  
the cause it attacks at all periods of life when its approach is  
gradual it is an unfavourable sign when sudden the prospect  
of cure is more ~~favorable~~ encouraging gutta Serena is sometimes produced  
at once by congestion of the brain with blood here the blood is pushed  
on the nerve and causes paralysis &c. Purgings and a strict antiphlogistic  
treatment constituted the treatment case of a young man with  
insupportable vision much impaired put a active antiphlogistic plan  
I recovered amaniosa comanabicae completely blind (narrow)  
Septimo much affected purging & blisters as aforesaid were prescribed  
and the next day vision was completely restored if caused by purpura

the more mercury may be of some benefit For piths mineral  
and licquorise 3 parts and as use it as a stimulant it operates as a blister  
cases when the stomach is in an acrial state direct Your remedy  
that organ Electricity or galvanism before using these means which  
is purpore that causes the disease or want of tone the latter is the  
only case where the last mentioned remedy could be used with  
any benefit John Francis a sailor stout and vigorous had been subject  
to pains in the head for 2. Years for the last 6 months it had increased  
tation was introduced and he was cured and directed to keep the tation  
open at sea he suffered the tation to dry up headache returned  
pupils dilated convulsions came on he died the next day on exam-  
ination post mortem the brain tinged with blood as small abscess  
near the foramen cecum the nerve on the diseased side smaller than  
the other Dr. Physic has tapped the cornea & let out the aqueous humor  
would let out a portion of the vitreous humor with a corneal knife  
when the disease is caused by pupure -

Moats floating before the eye

Some persons have this disease many without receiving any injury  
from it a young lady consulted me whose eye is in such a state  
that when she looks at any object in a certain position vision is

entirely destroyed in other directions it is perfect

### Cataract

then an 2 coats to the crystalline lens which may become opaque as well as the lens when this happens or cloudiness is observed but patient can distinguish between night and day cannot discern distinctly objects the cause sometimes depends upon the local injury but more common it arises without any apparent injury one eye is generally first affected after some time the opposite eye takes on the same disease actions in a great number of cases most frequently see the disease in middle and advanced life it is sometimes hereditary in one family & operations on the father and 2 sons no reliance is to be placed upon blinding pumping cupping &c. unless the disease has arisen from external violence in cases that come on gradually an operation is the only remedy upon which we can rely before operating you should examine the eye in different degrees of light to see that the retina is perfect as to see the difference of strong colors it is very favourable you will find the lens of different of hardness the fluid lens is very rare the soft lens very common the not so frequent I prefer cupping or breaking up the lens. Sir W. has been in the habit of cutting up the lens so that it might be absorbed have operations always on the principle laid down by Huy and Hall on eye

that eye was in the Hospital the patients constitution. He a robust broken  
 down he was of the soap bubble constitution of Dr. Rush & afterwards operated  
 for the other eye and he lived for a long time <sup>to be</sup> getting well. His habits  
 however have prevented a complete recovery. He commands not to do  
 too much at a time before operating apprise your patient that  
 the operation may possibly be unsuccessful. Sometimes the inflammation  
 which follows the operation is pretty severe in some old people & chronic  
 inflammation after an operation will continue a long time and old  
 Gentlemen wish us to operate on this eye he had rheumatism I concluded  
 rheumatism would continue through the winter and upon being operated  
~~upon~~ on the eye would become as weak as a part and as weak as a part  
 is very liable to take on a disordered action which may exist in the system  
 when you wish to operate on a person you may irritate the diet a little  
 and purge an opiate should always be given 1 hour before the operation  
 Stomachum should be applied to dilate the pupil this is a powerful  
 narcotic I operate with the patient in a recumbent posture and use  
 Pelliers Speculum the mouth between Scarpas and Keys I think is best  
 Scarpas it is too much curved & Keys it is too blunt insert it behind the Iris so as to  
 avoid the ciliary process flat side towards the cornea carry it downwards &  
 somewhat backwards when you have the mouth entangled with the lens  
 or capsula push it gently through the lens into the pupil giving the mouth  
 rotary motions you must draw the mouth through the pupil if the lens is  
 hard push it down into the posterior chamber lacerating the capsula  
 if the lens is of a cadidous consistence I cut it up and endeavour to press  
 it into the anterior chamber

that it maybe absorbed you maybe assume that you have broken up the lens by using small pieces float in the aqueous humor then stop the operations let nature proceed with the cure now keep your patient at rest in a dark room giving as portions of laudanum <sup>2</sup> every 6 hours some persons bleed to prevent inflammation my experience proves the reverse will be the effect of the operation the system is thrown off its Balance and the weaker part is a sacrifice. If Inflammation does come on use U.S. and prompt and vigorous remedies but they will complain of a little pain which will be relieved by an opiate. Allow water for food them to use their eyes soon after Inflammation has been operated on with success the L<sup>o</sup> Dr. permitted his patient to walk out the Walks after the operation the eye which caused seven Inflammations and the loss of Eye -

### Tapping in Dropsy (see L<sup>o</sup> 28 of my notes)

Dropsy is sometimes confounded with tympanitic affections before operating we should ascertain by the fluctuation also whether the Abdomen presents an even surface and uniform if it does we may operate but if it is irregular the dropsy is encysted and not favourable for an operation. I generally tap in the linea alba some prefer the umbilicus I operate with patient in the erect position that the linea alba may be more correctly known push in a lancet and after the Incision is made the Canule so that the fluid may flow through sometimes after commencing the flow stops that is caused by the omentum lying against the Canule and must be remedied by introducing a probe and pushing away the mass after the fluid is evacuated applying at the opening by a adhesive plaster sometimes they spring a leak though not dangerous this accident should be avoided for this purpose use the following Plaster take resin any Quantity beat with oil as sufficient

portion of talon for use when a young practitioner I operated on a woman  
 whom certain fluctuations could be perceived, no fluids followed at her death  
 upon examination the dropsy was found to be encysted, mentioned as a case  
 when he tapped in the recumbent posture instead of piercing the line as  
 was for which he aimed in consequence of the dragging of the intestines  
 of the abdomen in place of the rectus muscle but did not wound the artery.  
 This case determined me never to operate in this position again. I cut a broad  
 lancet for the first incision then a blunt trocar if it was sharp it might make  
 another opening the canula of an oval shape case when I was called to see and  
 tap a patient for a physician but the abdomen being singular I declined  
 the operation her abdomen was enormously distended ten gallons of a fluid  
 of the consistence of the white of an egg was discharged (after death upon  
 death upon the examination) contained in cysts of various sized caps of a  
 young woman from the country the physician had told that she had an  
 aneurism of the aorta which of course alarmed her very much the fluids  
 appeared to pulsate upon pressing upon it I tapped her and she recovered  
 the distention of the urinary bladder may be confounded with dropsy  
 I have known it to reach as high as the scrobiculus cordis in cases that  
 came on suddenly it is always necessary to examine the state of the bladder  
 I saw a black woman in consultation who had a cancer of the uterus or four  
 months in pregnancy a tumor appeared to extend regularly over her  
 abdomen and increased as rapidly as her one month after it had comm  
 nced it appeared uniform except the left side was somewhat larger than the  
 right we suspected the uterus on of the physician and examined and found the  
 uterus distended about the size of a dollar and a tumor which was  
 suspected to be the for the parietes of the abdomen appeared very thin  
 and the case favourable for tapping remained without effect

unite the facts ~~as~~ came away by premature labour and with it an  
 immense quantity of fluid. It inundated the womb I never will tap  
 women in an impregnated state with the idea of evacuating the  
 water perhaps in some cases it would do well to bring on labour in some  
 cases of dropsy you will find the fluid of a dark color in some  
 will trickle down from the wound which will alarm the patient  
 very much as was the case with the young woman who thought she  
 had anison blood flowed and little or no water great nervous excitement  
 excitement came on I gave her an opiate and it gradually subsided  
 it is best to oppress your patient before operating that the fluids is somewhat  
 of a dark choc of a color and if you tap an irregular surface  
 apprise him of the uncertainty of success as widow had a regularly  
 distended abdomen supposed to be dropsy no fluctuation felt no operation  
 performed tumor remained Year after Year at Her death an examination  
 was made and a large fatty tumor commencing in the Pelvis by a narrow  
 footstalk was found filling the cavity of the body abdomen sometimes  
 we find the Parities of the abdomen thickened to the extent of some  
 inches if we puncture in such a case we should use a sharp instrument  
 as by using a dull one mortifications may result occasionally it is  
 necessary to puncture the lower extremities and then we have at times  
 mortifications at the consequence though I have seen it result with  
 puncture now and then you must wait cases when the opening remains  
 open a long time this arises from an ill conaction of the whole system  
 especially in Hospitals good pure air is the best remedy for this  
Conaction -

Fistulae in Ano (see pgs 41, 42)

This disease occasionally originates from hemorrhoidal tumors also from severe  
 phlegmonous inflammation of the part from erysipelas from injuries there are  
 4 divisions the complete the sinus passing from without into the  
 rectum in complete passing from without but not penetrating the rectum  
 and the interspace with an opening into the rectum but none externally this  
 last this last is sometimes called a goblin fistula we should first examine  
 the fistulas with a probe and if the sinus opens near the external orifice of the  
 rectum we may operate but if the opening is at some distance from it we might  
 divide numerous blood vessels for this cause we should be as wise in letting out  
 the sinus you should cut in the direction of the fibres of the levator ani muscle  
 if they should be divided this muscle cannot heal in consequence of its constant  
 use hectic fever & death are likely to result not a blunt point ~~existing~~ distoury  
 you may lay open / sinus & keep open (woud not lint stuffing it in from time to time as it passes  
 off by stool / woud well heal & bottom granulations shoot upwards and cure be perfect. if you use  
 wire you pass it thro' / sinus & pull it down w<sup>th</sup> finger or forceps thro' / rectum you then draw  
 it tight as is necessary. I have found this affected in scrofulous habits and consequent of lungs  
 such subjects are very unfavourable for an operation befr you determine to operate on a fistula  
 health & vigor of a patient shld be well considerd if / genrl health is not good / prospect of  
 success is not promising, remedies applyd befr / operation be actually bn of service, a probe dept in  
 int. acid or Hpts of lycopodium not succeed in healg / abscess. Case Gentleman w<sup>th</sup> a fistula high  
 up in / rectum, orifice fully applyd a sponge tent to insert wire kept it in some time / discharge  
 altered & healthy suppld in the way a cure was effected w<sup>th</sup> operation Case 2<sup>nd</sup> I operate on a  
 gentleman, / opening low down bt / healg process not tedious, got care w<sup>th</sup> then to keep up his genrl  
 health he finally got well. Case 3<sup>rd</sup> a gentleman & near R. Virginia, past / meridian of life wh  
 on constg / physicians in his neighborhood w<sup>th</sup> informd it w<sup>th</sup> best to use knife w<sup>th</sup> was done, fistula  
 high up not completely divided, / medical men in attendance diffd in opinion as to / mode of  
 proceedg, I was chosen to decide and was consulted by letter, statg they had bled, purg'd & kept the

55 man on a low diet, untill his strength was nearly exhausted & confined him down to his room, he was very much debilitated, I immediately proposed giving him a good diet, remove all local means, use tonic medicines, should be carried out in his garden untill he was able to ride, an immediate change was the result, healthy sleep was discharged & he was cured. Fistula in ano is frequently connected with pulmonary consumption. Case of Dr. Blot Operated on him in my office to my astonishment it did not heal, wore a smooth cast of continued in the state nearly a year when it closed & spitting of blood followed which was Phthisis Pulmonaris carried him off. Case 5<sup>th</sup> an eminent Surgeon the fistula of much time, general health good Operated upon him, his general health continued good for some time, when his health began to decline & discharge ceased to flow & sore which bore all marks of an ill conditioned ulcer, well marked Phthisis Pulm. closed. Case 6<sup>th</sup> A young man not predisposed to pulmonary consumption applied to me with fistula in ano, I concluded to drain was an evacuation instituted by nature & it was stopped with Pulm. was immediately carried off he has since took in / Southern states & returned much improved. In cases where hemorrhoidal tumors have been cut off the ligament that suspends the hemorrhoids might bring on tumors again and put a stop to / fistula. fistula in ano may be cured with some other discharges especially with hemorrhoids therefore within four days he was in his back, & if he had if he discharged matter. I visited a patient who was thought to have fistula upon examination I found that there was some disease of the liver and / matter discharged in this way

### Diseases of the Urinary Passages

Retention of Urine. in the disease / kidneys secrete / urine & it is passed into / bladder & stays there, in suppression no urine is secreted by / kidneys, there will be violent efforts to pass / urine with / power, you may by placing your hand on / pubis feel / tumor & by pressure much pain is felt, I have seen / bladder so enormously distended that some persons would have mistaken it for the / (disease) in corpulent persons, it is not so readily perceived. by / appearance & sensation you may pass it by introducing your finger into / rectum you may feel an elastic tumor in / situation occupied by / bladder. / bladder may be distended to an enormous extent & when dilated to a certain point / urine will flow in great quantities & the state of / bladder continues untill full dissolution / with / urine will frequently pass in small quantities under / influence of / will & yet / bladder be dangerously distended, in such cases / bladder has reached a point above / pubis, / muscles of / abdomen force out / small quantity that is passed leaving / bladder in / same state of distention Case 1 an elderly gentleman under / care of Dr. Hester had some disease of the organs of / prostrate, / urine was discharged

in usual quantity (bladder no sign above / pubis, he died, upon examt / post Mort. above 2 qts  
of urine was found in his bladder & / prostrate died. In some cases of low fever not mild delirium &  
the patient & those about him being not aware of it drugs distasteful may arise Care when on a  
visit to Columbia I was called to see a child by Dr Mc Cordle a married woman w<sup>th</sup> 2 children  
was then 2 days before I saw her not tumefaction of / abdomen, nor prominent internally above  
pubis w<sup>th</sup> her / kidneys of part. my opinion was request upon examination I found  
considerable fluctuation w<sup>th</sup> a well marked tumor, situated low down & felt hard, w<sup>th</sup> above /  
tumor of / natural feel of appearance the hd passed her urine every day as usual by an effort  
of / will. One day she did not discharge any, I proposed passing / catheter w<sup>ch</sup> was accordingly done  
she had been in a delirious state & some time abt 1 qt of high colored urine escaped, she became extremely  
restless almost unmanageable, I was obliged to withhold ether altho this must have been consid-  
erable quantity left behind, her strength now declined, a bandage was placed round her abdomen  
to keep up pressure, her pulse sunk & every effort to save her proved unavailing. Care of Dr Breckley's  
child a hearty infant at birth a few days after it passed no urine, her came on by spells & was  
severe / abdomen was considerable swollen but what is remarkable it was now emaciated than  
at birth Dr D <sup>Dr Devoes</sup> called me for / purpose of evacuating urine, he had an idea that it was  
retention of urine, I found her in great agony paroxysms frequent of abdomen enormously  
enlarged, / veins in the course over it were very much increased in size, limbs very much e-  
maciated, I introduced / catheter w<sup>th</sup> little difficulty & to our surprise no urine flowed  
I was at first inclined to suppose it might not be retention of urine, but Dr Devoes was so well  
assured of it that I withdrew my catheter & examined it, & found more or less was filled up  
it was cleared out & again introduced. / urine then flowed w<sup>th</sup> rapidity / muscles of / abdomen  
became relaxed & pain so much relieved that child fell asleep whilst urine was flowing,  
urine down off at one time weighed 18½ oz avoirdupois & a child only 10 days old, (following day  
several more ounces were down off but child sunk, / parts of generation were considerably  
tumefied & inflamed. Cold applied to / surface or exposure to very cold is frequently /  
cause of retention of urine in the cases I mentioned with answer. Care of a black  
man brought to my door by a watchman on a severely cold night, unable

57 to pass his urine & in great pain, I wish to take him to the house to his box till morning but he refused to go & set up such a howl at my door as much like a dog as I ever heard that I was forced to come down & let him in, the him into parlor, his clothes were all in tatters giving free access to cold, recollecting that he was in the house, I gave him a glass, seemed better for him a moment, for he was shivering with cold & sent him to the almshouse next morning he left the almshouse perfectly cured, for it seems as soon as the gin began to operate he became warm & passed his urine.

### Diseases of the Prostrate Gland

Old persons are more liable to disease of the prostate than young, & sufferings & it are severe in extreme, great & constant efforts are made to pass urine which is only evacuated by spoonfuls. Tatters in company with 2 other physicians an old man with this disease his discharges were very great, we find it impossible to relieve him by any means after suffering many years he died. it proved the disease of the 3<sup>rd</sup> lobe of the prostate gland. you will sometimes meet with disease of the 3<sup>rd</sup> lobe when it is elongated & enlarged into a triangular form somewhat in shape & function to the epiglottis, it causes most excruciating pain & efforts to pass urine are unavailing, the muscular coats of the bladder in these cases become much thickened, you may pass a catheter as far as the prostate & then it will be stopped by the projection of the 3<sup>rd</sup> lobe, to overcome which you may withdraw the catheter & curve of the catheter & it will probably pass over the 3<sup>rd</sup> lobe, or giving the catheter a better direct it may pass on one lobe. In a diseased prostate rest is most obvious means of cure, I am determined in the next case I meet to tap the bladder above the pubis & leave a tube in the opening until a cure is obtained. In an eminent & respectable brewer of this city I was called to a friend Dr. Physic in an operation, the man was diseased of the prostate with great difficulty of passing water, the catheter was used for some time & bougie occasionally resorted to not only temporary relief, we made an opening in the bladder when it was distended above the pubis & introduced a gold tube

a gold tube made for purpose of this an artificial canal to which he had a  
plug he could pop his urine at pleasure & it was of so little inconvenience  
to him that he rode out & attended to his ordinary business. see 59 overleaf

the debate  
passing in co  
with the  
or was not  
I can not  
adoption

They in fact  
the question  
that compla  
a cork porro  
the end of  
the other  
in such a  
at the end  
the present  
very morin  
to remain at  
slap as in  
the tongue  
of the tongue  
the piece of  
small piece  
obscuring the  
even in the  
the most the  
difficulty in  
the most when

As death was gradually recovering when at the expiration of 2 Years the urine  
 passing in considerable quantity by the natural passage he withdrew the  
 catheter without our knowledge the disease returned with its former violence  
 we were not able to pass the catheter in the opening and he died this operation  
 considered the safest and best that has been proposed and should always  
 be so.

## Structure of the Urethra

They are spasmodic and permanent by frequent spasm they become permanent  
 a greater number of patients may be cured when a person labours under  
 this complaint the stream of urine is small in some it passes out like  
 a cork down in others the stream is divided case of an old Gentleman and  
 the case of Dr. Wither-supp. of a late labour under gravel but by introducing  
 the catheter a few times he became perfectly cured. Painless stricture is at times  
 in such a condition as to mistake for gonorrhoea your first object should be to  
 introduce a Bougie and ascertain if any stricture be present in some cases  
 the patient may introduce the catheter himself it should be introduced  
 every morning and remain 15. or 20. minutes at a time not permitting it  
 remain at night at any time when the patient is disposed to get to  
 sleep as in one patient when this happened a spasm took place and forced  
 the Bougie into the bladder in many cases the simple introduction  
 of the Bougie may remove the stricture by dilating the part to ascertain  
 the place of stricture introduce a wax bougie then take and roll up a  
 small piece of caustic in the end of the bougie if any good is done  
 burning sensations it felt caustic at times produce but consequent  
 even haemorrhage may result from its use when you apply caustic to tight  
 strictures the inflammation and thickening of the parts will occasion increased  
 difficulty in passing urine until the sloughs are cast off you may mix with  
 strictures when a healing of the urethra behind the place of stricture

60  
occasionally by the constant efforts to pass their urine, case as patient in  
the almshouse Hospital, stricture of long standing weakening him so that  
stricture caustic was applied but the urine came away behind the stricture and  
the urine was effused into the cellular membrane of the prepuce. He as tumor  
in prepuce which exists with stricture is a pleuritic ecchymosis and it is best  
cut down to the urethra and slit open the stricture in the case of effusion in  
maturation & mortification took place before I would apply caustic to a stricture  
when the urethra is dilated behind as it I would make a fistula in prepuce  
admit of as free discharge of urine and afterwards attend to the stricture the  
effusion does take place sometimes when no caustic has been used as in a  
case under the care of Dr. Wilson I used applied to by a patient with stricture  
from Gonorrhoea of 18 years standing a small tumor had made its appearance in the  
prepuce flow of urine full and complete in a short time the tumor dis-  
eased and as tumor & foci of all the neighbouring parts took place effusion  
took place the effect of the effusion with prostatic numerous fistulas opening  
the urine still passed through the urethra but a portion passed to the cellular  
membrane. In children the urine is not so acidic as in adults Dr. J. Rhoads  
proposed and executed in 3 cases the following plan cut directly across the  
urethra then introduce a bistoury cut upwards until you open the prepuce  
in a case of a child under the care of Dr. Wistar and myself effusion  
took place in the cellular membrane ulceration took place heat  
pus was discharged I make it a rule always to cut down to the urethra  
with a Bistoury case in a patient I saw operated on for stricture the  
parts were cut with a scalpel in a shocking manner case as patient in  
the almshouse his penis almost gone and the urine constantly  
out through a membrane of sinuses which caused great irritation and  
inflammation of the parts in the neighbourhood were cut down to the  
urethra and introduced a catheter into the bladder the sinuses healed

sinus healed up by the application of caustic to the surface than an abscess  
 which suppurates as case occurred in the Sen: Hospital which fell under  
 the care of several Physicians he had numerous sinuses extending in all directions  
 pouring out their efforts to cure him were unavailing if such a case were  
 come under my care I would tap the bladder at or near the pubis by this means  
 establish a new route for the urine that sinuses might be healed or get more  
 under the control of treatment when the new passages are only for emergency  
 relief I would punctate through the rectum case an elderly man had this  
 for several years which terminated in a fistulous opening the urethra  
 as destroyed by caustic catheter was passed thereby affording a new route  
 the urine and a gamist to the fistulous opening it was healed in 1820. a man  
 on the west Indies came under the care of Dr. Physic Horner & himself with  
 a large opening in the perineum through which the urine passed I passed  
 the catheter and Dr. Physic applied caustic to the whole surface liberally  
 which soon stimulated it into action and we kept the parts together by  
 adhesive strips it healed the plan of cutting a piece of sound skin from a  
 neighbouring part and filling the opening with it may perhaps succeed in  
 some instances and in a bad case I might possibly try its effect

### Irritable Bladder

In this case there is frequent calls to evacuate the urine which passes off  
 in small quantities at a time when this complaint is not symptomatic of any  
 disease I believe it is occasioned by an inefficient quantity of mucous lining  
 secreted by the bladder this leaves the internal coat of the bladder without a  
 defence from the acrid nature of the urine to relieve this injections of fluid  
 made very wet you must throw it gradually in to the bladder without a  
 throw it in all at once the bladder might be stimulated and reject it  
 you must strain the tea carefully so that nothing may pass in that would  
 form a mucus before injecting evacuate the bladder not more than 2 or 3  
 drops full should be thrown

62 in the first term Diagnosed in stone when the patient passed his urine the bladder contained an ascarid substance and occasions severe pain the patient is also tormented with violent pains in irritable state of the bladder no such pain or paroxysms is felt case a patient who has great sensibility of all the urinary organs with a burning sensation when he passes urine inspections of opium He even urinated without any relief case a young man sent to me by Dr. Physick thought from symptoms this was stone but borbina could discover none the patient taken internally gave him great relief case of a woman in the Penn. Hospital had a very bad state of the bladder was borbina frequently for stone but now could be discovered no stone post mortem no morbid structure except in the intestines occasioned by dysentery of which she died Dr. Physick thought it was similar to Pic Doloreux I never knew this was a case when the symptoms of stone were better marked case a gentleman subject to gouty affections was troubled with an irritated bladder which sometimes attenuated with gout became more continuous and severe the catheter but he died of a mortification did not appear to be in the ureters as the stone of attack the kidney very much emaciated sometimes even on a tap the bladder about the pubis at other times at other times we are forced to tap through the rectum when the prostate gland is dilated the opening to be made above the pubis and when the opening is to remain for some time we shall make use of the same place a man fell at the side of a rail made a severe contusion in the perineum inflammation and tumefaction followed to such a degree as to close up the opening of the urethra by proper applications the swelling was sufficiently removed to introduce the catheter in such a case if the bladder called loudly for relief it would choke the rectum to operate through the opening through the rectum sooner than that about the pubis it is necessary to prevent the instrument from slipping out if such an accident were to happen the urine might pass into the cellular membrane between the rectum and bladder

### affections of the urinary organs in gouty habits

Calculus sometimes found in the bladder in these affections which pass along from the bladder pelvis of the kidney along the ureters and finally lodge in the bladder when the stone is in the ureter the pain is severe in the parts it meets the vas deferens which becoming irritated the testicles become congested and swollen up to the utmost limit in some cases the bladder is the principal seat of pain frequent calls to urinate and sometimes vomiting attends case a gentleman of middle age & temperate habits got up to make water and was attacked with violent pain so severe that he fainted and I was called to his assistance I found his pulse full & then cold he recovered under proper treatment in such cases I have seen patients die

about bleeding which I so much recommend in this case I relied upon opiate  
and I find as patient labouring under this condition skin color system prostrate instead  
bleeding I give an anodyne if the bowels costive I would give op<sup>laetum</sup> <sup>laetum</sup> before the  
anodyne turpentine is sometimes used cupping & leeching to the part after the stom  
ach passes into the bladder to prevent when the stom has passed into the bladder  
means to discharge it from the bladder never inform Your patient of this  
finger of the nucleus being formed for stom let him take copious draughts  
mucilaginous drinks when You find the urine deposits alkalis I have ben  
ind of Savia when it deposits a white sediment acids on the propper urine dis  
cuss the impediments which I have stated to you then on some others account  
with inflammation of the neck of the bladder & occasionally by repeated  
on impure acids hard to pass the catheter and from masses of coagulated blood  
and in the canal and sometimes even in the bladder. I was called to as patient labour  
under retention of urine his attending physician made repeated attempts  
pass the catheter without success I made a trial found that inflammation  
thickening of the parts had proceeded to such an extent that the catheter  
could not pass he was bled at the arm leeches applied to the part and the catheter  
in a warm bath in a few hours I passed it without any difficulty in some  
cases I could pass it down as far as the pubis in others as far as the umbilicus in some  
tion of the urethra then it would stop taking a lateral direction giving  
a great deal of difficulty without being able to account for it until 1819 I  
of a case when the catheter seemed to stop against a solid body giving  
no sleep to myself and in making my effort to pass it something seemed  
pass along before it as short distance & stop upon something seemed  
in catheter I found that a mass of coagulated had followed as at the  
tip of a mass of blood formed a barrier which caused the difficulty this gave  
the lateral turn to the catheter as it passed along soon of the blood as short  
distance I washed away the blood by introducing a tepid fluid  
now from ignorance that coagulated blood

does frequently lodge in the urethra and even in the bladder I was called in  
consultation to a farmer who laboured under retention of urine physicians  
in attendance found difficulty in introducing the catheter but I intro-  
duced it with out any difficulty and relieved him 10 days after I passed the  
catheter again short time after could not pass on acct. of coagulations blood  
with as spongy I introduced a warm water through a catheter washed out the  
bladder repeated by until the water came away clear this plan of treatment  
effectually cured him

### Diseases of the testicles

often after the urethra by sympathy and can only be removed by removing the primary  
complaint as hernia, Hemorrhoids, prostatic suppuration gonorrhoea it is necessary  
to examine the urethra before you take any active measures to relieve hemor-  
rhoids it happens that H. Hemorrhoids and Hydronephrosis combined  
such a case it becomes necessary for to cure the hernia hemorrhoids before  
you attack the hydronephrosis case a patient in the army house had been long  
time afflicted with H. Hemorrhoids and a large hydronephrosis passed a number  
the care of the care of the different Physicians of the House without  
any relief when he came under my care he complained of pain in his head  
to relieve which I gave him emetics and purgatives Hydronephrosis continued  
enormously enlarged I tapped it and to my surprise I found it soft and  
natural no urine being it had to inject I tapped it in patient lost inflammation  
was kept up above high as to treat I drew blood from the arm and drew  
him perfectly cured as captain of a vessel who consulted several Surgeons  
of New York received no benefit came to this city was seen by Dr. Phelps  
and myself the testicle was very much enlarged I discovered a distinct fluctuation  
in the upper part of the scrotum could see its transverse motion  
by holding a lighted candle behind it but there was a hard part below  
found he had a stricture put him on his back and commenced passing  
him passed Bougie gradually enlarging stricture by dilatation

the peristaltic push him on the way of delivery and his distal is much relaxed in size in inju-  
gion up to the fistula it sometimes passes into the cellular membrane when this happens it will  
flow back through the canulae which prove as great source of irritation and sometimes  
inflammation called for Dr. North's use as called in consultations with had passed into the  
or membrane he made a member of him strong and squeezed out the urine patient  
will of such as ease falling my lot I will squeeze out all that can escape and then inject some  
and water so as to wash out the urine

Diseases and Injuries of the Spine (see p. 30 of my notes)

I shall confine myself to as few of these diseases as I can as I am most subject to to these  
in as physicians when called is called to as a disease of the spine in the lower extremities  
he find them weak and upon making a slight examination the patient tries to  
and he will find the curve deviating from its true position and by directing  
patient to lie flat on the room he may observe him to lean to one side and by  
of along the course of the spine the tenderness of the part will lead to the  
of the disease sometimes lumber aces may invade the bony structure and cause all  
symptoms of compressed spinal marrow if the disease of the spine advanced  
there is very little hope of it being cured without more or less deformity you should  
of the spine which keep open until all disease is removed Dr. Physic dispen-  
the bladder being of equal benefit to keep the patient in as much  
then with purging continuing by sea bathing has been found useful and those  
rehearsal on the sea should have been benefited by a removal to the mountains  
of the country which shows that as removable as a support and those  
such the patient has been accustomed is as very useful remedy sometimes persons receive  
injury by falling on the spine some of these may be broken and paralyzed  
the lower extremities the consequence frequently in such cases the bladder partakes  
the injury of the spine and becomes paralyzed distinguished with urine as a sign of  
the cathele becomes necessary in as case of injury of the spine in the lower extremities  
lower extremities even paralyzed when a live coal was put to the leg the patient  
Dr. North's use as called in consultations with had passed into the  
Dr. North's use as called in consultations with had passed into the  
body become is paralyzed without fracture of the bone but from the violence of  
concussion there is in these cases an effusion of fluid in the spinal marrow  
of an station sailor in the Dr. North's use as called in consultations with had passed into the  
on he was not discovered until morning when he was found in the hold of a ship being  
on examination then appeared to be a fracture of one of the cervical vertebrae  
him upon the use of electricity externally & internally so that the absorbents  
got take up the effused blood he gradually recovered when a strangulated

Hernia took place and soon put an end to his existence in a short time case Charles  
 Porter and engraver in going round ~~London~~ by swiftly with his hand on the type felt ap-  
 plication of heat and soon ~~the~~ pain in 1/2 or 1 hour he felt Paralytic legs no  
 come on in the bladder participated in the injury and it was necessary to resort to  
 catheter frequently the left leg became partially paralyzed the right completely  
 so the left side of the body also became also became paralyzed mercury failed  
 to affect his mouth caustic issues were applied to his back constant purging even  
 a cumulated in the bladder & sometimes mucus also came away & 8 hours before  
 his death the catheter became clogged with mucus so as to obstruct the passage  
 through it upon examination post mortem urine was found diffused entire  
 abdomen the bladder had abraded then was perforated and that on the right  
 side was in contact with a portion of intestine which had also taken on the  
 ulceration that it was filled with mucus the vertebrae were found thrown apart upon  
 as transverse section of the spinal marrow we found an effusion of blood in the  
 center of it the wife of an old man at coveringtown was affected with Paralysis  
 with retention of urine I could not understand that she had received any injury of any kind  
 but no examination was permitted she had been subject to Rheumatism which affected her  
 back and we accept in my mind affected the spinal marrow brought on tumor formation  
 which was the cause of her complaint cases sometimes occur in persons of former  
 in good health commencing with weakness in the spine irregularly in walking  
 the whole nervous system becomes affected palpitations of the heart with loss  
 of seminal power & venereal appetite the spinal is in my opinion the prime  
 seat of the disease a plan which I approved of but never tried is to confine  
 the patient to his back on a mattress for 12 or 15 months in some cases I will  
 this plan in practice in my next case

### Hernias

In operating for hernia you will meet with many fasciae which  
 have been minutely described in the books at they serve only to perplex  
 the student you can should be to dissect carefully until you come down to the  
 hernia sac which you pinch up with a delicate pair of forceps and make  
 a small incision then introduce your anastomosis and avoid the strictures  
 always open the sac if you dissect so carefully as to let the distant layers of  
 cellular substance how are you to distinguish when the blood is flowing from  
 every point sometimes the fluid in the sac is of a bloody color if the surgeon were  
 not aware of this he might be startled at it

67  
venter inguinal Hernias you will find the intestine passing from the abdomen  
through the external ring the situation of the artery in this particular Period of-  
union the artery on the outside of the intestine and the cord on the anterior part  
extending directly upward is the safest general direction but sometimes you will  
meet with the Epigastric artery in this situation in cases of Hypogastria of long standing  
the abdominal rings are very much approximated and the hernia appears  
protrude directly from the abdomen through the external ring symptoms  
strangulated Hernias symptoms resembling Colic (when called in cases  
of Colic always suspect hernia) pain in the belly retching vomiting &c. in this  
non violent case, Stercoraceous stool & thrown up tongue various sometimes  
purged sometimes clean & Natural as disposition to open the bowels  
allows the attack sometimes as copious stool is the consequence a collection  
of feces may have been deposited below the stricture which may be  
evacuated if neglected Inflammation advanced until mortification and  
death close the scene Remedies free use of the lancet opiate tobacco-injection  
&c. of order as dangerous remedy especially in inexperienced hands purgation  
takes place at the external ring you will find as tendinous bands that caused the  
stricture but when at the internal ring you have tendinous fibres warm  
tumor Faded in this operation you should never use considerable force if  
the patient has been in the habit of recurring it before strangulation  
his efforts will be more likely to succeed than those of the surgeon when  
the bowels is about to return as gurgling noise is heard after these plans have  
failed You must resort to the Knife a small Hernia requires an operation at  
an earlier period than a large one if from 12 to 24 have elapsed in a  
small Hernia after using these remedies without effect you may resort to the Knife  
the Hunterian sac should in every instance be opened at the stricture may be caused  
by the sac opening the peritoneum in this case an one attended as much damage

68 as we might a priori expect seen by 9 P.M. noon & myself at robins  
with it appeared to be bubonocelic R.S. opium does without effect I had continued  
70 or 80 hours. 3. began the operation by making as crucial Incisions dissecting  
the flaps some small arteries were divided and taken up upon coming to the sac  
which I dissected from it there was as stricture in the sac and another  
at the abdominal Ring a small portion of testis showed itself beneath  
the omentum which was raveled with care but the omentum was left in the  
sac here covered - Dr. Wood was called to a young and delicate female  
all the symptoms of colic every thing she took was rejected Dr. Wood  
supposing it to be hernia called on me. Her delicate appearance & examination  
upon being examined of the consequences of the submission I found a tumor evidently  
Strangulated Hernia but so far gone as to leave little hopes for an operation  
the following morning Her health and spirits were much revived & I operated  
opened the sac by pinching it up with a delicate pair of forceps and dividing  
it totally with a lancet as before. Soon on convincing me when I was & the  
State of the parts the intestines was dead the case in the above hands in  
consultations with Dawson Haight from a young man a sailor in a young  
constitute or much force of circulation he died then the stomach incised  
bled him one hour after his pulse became low and we thought it necessary to  
operate gave him an opiate inflammation and adhesion had progressed  
rapidly we divided the tendon of the external oblique near the ring  
the intestines appeared to be inflated with flatus to ascertain whether  
they contained any solid matter I put my fingers round the tumor  
I found a solid substance that appeared like omentum which convinced me  
that it was not yet through the sac I operated it carefully as small quantity  
of fluid escaped its cadaverous smell convinced me that there was mortifi-  
cation by laying open the parts we found the stricture was at the internal  
Ring made an Incision into the dead bowels and force escaped in large  
quantity mortification may exist without the symptoms being apparent  
heard

a molatto man in the Pac. Hospital Strangulated Hernia all the usual remedies  
 were in vain neither pulse tongue nor skin indicated gangrene operation was  
 performed (abdomen was tender and painful) found no difficulty in opening the  
 sac mortification had taken place at the extremity of the hernia that  
 lay near the stricture was sawed off opened the stricture and returned  
 the intestine exhibited a bulky water-belly symptoms were favourable for  
 some days but a change took place and the acid in some cases large  
 quantities of flatus may be discharged at different times so as to appear  
 as if generated in the portion of intestine below the stricture and in some  
 instances repeated stools have taken place called at a woman who  
 had been subject to hernia for 2 years it had become strangulated  
 the discharge so copious stools vomiting had occurred several times  
 I found the tumor tense and hard tongue furred pulse moderately tense  
 took 12 oz blood & was applied an injection an. Malacca cream tartar  
 & cinnamon at this time she was strong enough to raise herself in bed  
 with the greatest ease 4 hours afterwards her system was declining fast  
 her pulse low and sinking at 11 o'clock at night her body particularly her  
 extremities became cold & clammy sweat had broken out and she appeared  
 in articulo mortis portion of the small intestine was found strangulated  
 a small hydatid appeared on it and a small portion was found strangulated  
 a woman aged 62 Strangulated femoral hernia she had been blind  
 ice applied to the part when I saw her there was pain in the part pulse  
 full cold sweat tinged and every symptom of mortification the  
 tumor appeared to be under poultice Ligament Link a pin was given  
 her & operated out a small opening in the bag and dilated it with a  
 director then used my finger as a director bloody serum appeared a  
 slight smell but not cadaverous the small portion of intestine was  
 of a mahogany color I pushed my finger up to the stricture and  
 thought I could feel an artery pulsating there present felt and confirmed

79 My suspicious I cautiously hooked on my nail a portion of the stricture and divided  
it then felt a little further and divided more until there was sufficient room to return  
the protruded bowels her pull was low & his cold and clammy yet she recovered in  
strangulated hernia if we do not open the sac much mischief may arise from the  
neck of the sac being the cause of the stricture or theomentum being twisted round  
the bowels the caecum and small intestine to mortifications with which there is any  
aspect which is difficult to describe the dark color is often taken for mortification  
is no certain mark of its presence by pressure we can discover an absence of circula-  
tion in the part. Strangulated Hernia, but this is not a certain mark of mortifi-  
cation because in the parts an absence of circulation by pressure we cannot say  
that circulation will not be restored when the pressure of stricture has been rem-  
oved case of a man whose hernia became strangulated bleeding and tobacco  
injection used. Serotum was of a dark color tongue moist pulse full tumor painful  
60 drops laudanum were given we operated dark fluid escaped but there was no  
the heat of the stricture was in the neck of the sac 8 or 10 inches of intestine pro-  
truded of a dark red color upon pressure upon any part of the intestine the  
colour did not disappear which indicated an absence of circulation in a hernia  
were found about the neck of the sac some prominent thought that the intestine  
were dead others that they were not the stricture was divided and a bladder  
of warm water applied to it dark color disappeared in 1 & 1/2 hours. Inflam-  
mation had taken place and a coat of coagulable lymph was thrown  
upon the surface it was then returned & recovered never to be in danger a hernia  
to recur as bowels nor to open it if your mistake a living portion for  
a dead one it will be a serious error if the bowel is dead you may ma-  
nipulate and wait for the sloughing the adhesion loosely through  
the 2 portions & establish its attachment then divide the parts and an  
opening will be formed in the natural passage where small parts  
are mortified on an intestine which has been returned and the piece  
sloughed out the feces do not pass through and mix with the  
contents of the abdomen but generally pass through the

tinal opening which in such a case should not be closed, neither should a  
 ligature be passed through such as portions already irritated and  
 inflamed by the stricture. Case at Germantown Joseph Dill on the strangulated  
 umbilical remnant had been employed without effect on opening  
 the spermatic chord lay in front <sup>of the bowels</sup> the cadaverous smell was very  
 evident the intestines were of a dark color and spots of a still darker color  
 evidently mortified returned the gut he said it was ventis ingenuis came  
 directly from the abdomen and the epigastria artery was on the out side -  
Omental Hernia -

The species of Hernia is much less dangerous than enticement the pain  
 in pressure is not so severe & extrusion of omentum is that when a per-  
 son of omentum has remained so long in a Hernia as to look as if it were  
 all its natural character on returning it into the abdomen it  
 acts as a foreign body producing symptoms fatal either by  
 pressure called to as a wound. Case Hernia sometimes became stran-  
 gulated & sometimes vomiting has come on for sometimes longer had  
 a dark firm on it no clammy sweats I found a tumor on the upper  
 part of the thigh passing to the sc 7.2 over leaf

entered only of  
 such a large man  
 was by all  
 seen as eating a  
 little, otherwise  
 was seen in the  
 old at all / post  
 me, it is commonly  
 in fact not in  
 the same way  
 my separate up  
 new at all, no  
 more and though a  
 round, one  
 both only of / some  
 some of the little  
 red as it for the  
 close, instead of  
 or a minute ear  
 of some of coag  
 ated, otherwise  
Amelans has  
 troubled portion in  
 matter of it by her  
 ly, he that has of  
 ation is returned  
 is a distinguish  
 at, shows his  
 old strength me  
 ing of any more

downul ring aft giving an injection of opium, I operated, hd a good pulse bowels tender, on opening  
 sack a large mass of omentum presented, bt no fluid, omentum impacted & bound together on all  
 sides by adhe bands no bowel cld be discovd, by cutg away carefully bands to some depth we find  
 cavity containing a small portion of strangulated bowel of a dark colour, bt no smell, then divided the  
 intestine, returned bowel, bt what was to be done w<sup>t</sup> omentum? <sup>in the unusual condition</sup> we concluded in consultation to let  
 remain in sac, his system sunk rapidly & he died. If a similar case shld be presented to me  
 I cld cut off protrud omentum except a piece sufficiently large to put in abdominal ring so that  
 might cement & cure hernia completely. Case of a woman on whom Dr Hewson operated, omen-  
 tum & gutt w<sup>re</sup> in a small (condit) sac, to let of / let off, it was returned but she died, before any other op-  
 eration became necessary. Case a man at Burlington signet at fort mld bt after it became ne-  
 cessary to operate upon open sac we find a large quantity of omentum & the and a small portion of intestine  
 present hd all marks of mortification / intestine appd to be large / bowel was returned, omentum was permitted  
 remain & slough away in a short time luminous granulations protrud up to surface, we tied  
 around omentum gently tightly it, it sloughd off and he is now a hearty man, when you find  
 intestine only, of omentum mortified, I do not think it advisable to cut it off bt let it slough away. Case  
 man at Beetham brought on hernia by violent exercise, it became strangulated, usual efforts w<sup>re</sup> made  
 to reduce it bfr I arrivd, I operated when I opened sac it hd appearance of coagulated blood, and  
 colour inducd me to believe it was mortified upon cutting into mass it bled & veins & upon  
 minute examination I found bld had exud out of omentum & had gon (w<sup>th</sup> mass  
 appearance of coagulated bld, blades of worm w<sup>re</sup> not applied to part, structure was divided &  
 intestine returned w<sup>t</sup> omentum, symptoms of inflammation appd for wh he was bled freely bt he died.

Anomalous Cases Surgeons will not find a tumor wh has been caused by a hernia of long stand-  
 ing & protrud portion may be reduced to all appearance of cure / patient fall a victim to strangulation, living all  
 symptoms of it & post mortem examination confirms it. Case w<sup>th</sup> Dr Perkins, I Ewing and Dr Rose st-  
 dy, hd violent pain of constipation all means w<sup>re</sup> resort to relieve him bt failed he had no rupture w<sup>th</sup> no  
 tumor to return, & symptoms I concluded it must be stricture. but on examn cld not discovr it  
 I cld not distinguish any tumor in any part in a few hrs he sunk rapidly, a cold clammy  
 sweat bedewd his body, pulse feeble, abdomen tend<sup>er</sup> & tumid, agn examined bth abdominal rings  
 cld distinguish no tumor shortly after he died examination post mortem, we find stricture at junction  
 of a very small portion of intestine dark eld bt not mortified, portion of intestine when strictured prot-

73 was flaccid at all / others were distended w<sup>th</sup> flatul<sup>us</sup>. I was called to a woman w<sup>th</sup> strangulated hernia & to  
bacco had been used before she came to / Hospital, / symptoms ably in / every / operation was deferred, Dr Coats  
in / mean time made an effort to reduce it w<sup>th</sup> effort to succeed, but / symptoms still continued & she died  
after exsanguis post mortem a small portion still remained in / sac / strangulated. Case not Dr. Astley, no  
obstinate constipation I expected from his it was a case of concealed strangulated hernia, and an  
exsanguis but did distinguish no tumefaction but a part somewhat harder than / surrounding parts, and the  
some tenderness on pressure on a small spot w<sup>th</sup> I considered w<sup>ld</sup> justify / operation. I cut down and  
found a small portion of intestine peep out of / ring, divided / stricture returned / bowel & he recovered  
in this case I cut immediately upon / internal ring but in doing so the external parts are weakened and  
the patient is more liable to a return of / dis<sup>ease</sup>. Case of J Swarts first seen by Dr. Knight, was removed to / Hospital  
just as I operated on him I felt / spermatic cord w<sup>th</sup> is unusual in such cases, all / prominent  
marks of strangulated hernia, cut down to / sac & upon laying it open I found / coils bare / con-  
genital / soon find / intestine felt no stricture at / outer ring but by feeling higher up / stricture was  
I divided it returned / bowel & he recovered here no doubt / hernia had been returned as far as / int<sup>er</sup>-  
ring & the strangulated. when you meet w<sup>th</sup> old hernia w<sup>th</sup> many adhesions have formed, it is advis-  
able not to separate all / adhesions but merely divide / stricture & let it remain as before.

Trues  
No. 2

Whitcomb

Dr. Parrish's Surgical Lecture Nov 8<sup>th</sup> 1824

[illegible]

over riding the  
status, to in

[illegible]

after I judge use of these remedies will be in duress to continue them not only for  
tract the less now on ill than of ender to print of other

As being unpleased to see the new  
introduction of acts the constitution  
in degree in Artthorn

has a person my lie with abt 800  
miles on his feet yet it hurt him  
exactly ill  
there none dng as a pt to extend  
half p'rovince is off ~~more~~<sup>trans</sup>

The existing temptations available to it, and there as it opens in hospital attire - every one would or some seeking to depend on me after the manner of an impostor, and I am not to be as much as a spy.

more injury by long continued efforts to ascertain fracture

fore same place. The child would drink (more or less) in dark took a cup of lemon water in the afternoon. The child died.

[illegible]

[illegible]

[illegible]





bar rubro volkabe 2, 3 dys etiam infusio herp effro inire hinc /  
of bledr ruptio.

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]



[illegible]

[illegible]

[illegible]

place I do not also caution, spend of it on some use, which will excite grub all of  
and distress and influence <sup>indirectly</sup>  
crises or even when the side but called sort are unphly then pure  
I require unity to save the act of cause they to throw out belly pus when the  
is its is feasible <sup>is a sign that</sup> then granulate, when not long coalesced or at first any try mold  
upsto as I suppose, into the cruce solvent or belly <sup>is it not enough a seat</sup>  
I do though to act as a firmly erect <sup>is a sign that</sup> now act belly for granules with belly pus a for  
my good be withdrawn of every will be obtained by granules I do say by a for the pole  
and I introduce in some to decay, it also side not so present when it is up and on not be  
of belly water <sup>is a sign that</sup> let off for study upsto my try in up of belly (seed) about case attitud  
is always be to the state of upsto granules <sup>is a sign that</sup> tonic in upsto several treat ment and leave on of 3 or 4

Ulcers, are a kind of cutting <sup>is a sign that</sup> of a spot, and of a sort of excite into acts by purpose  
me irritating matter. formerly organs used to tantalize thing noted then <sup>is a sign that</sup> now <sup>is a sign that</sup>  
total of the much better and instead of vis blood ointments pusid lot of blood and <sup>is a sign that</sup>  
upsto, spots of mature by grant the total of ad have stop of belly, this is a got despot in <sup>is a sign that</sup>  
um into to be doing and off a belly ulcer is thus by doing too much involved into an under or over  
of many springs once the value in every ulcer entirely to belly shut out of upsto help kind of con  
ty case to return, but when an ulcer becoms wellent or withle of then there is a nepty to have upsto  
the there are some adult ever motives in fluxy ulcers case very indut ulcer, long time  
excepts inflame attack of upsto over limb, it trants volth of the ulcer of pusid a in forble  
nee of soon got well; in imittin of this I have tried history come indut ulcer be not  
me happy with this is a got despot in <sup>is a sign that</sup> upsto to ulcer apish belly caus  
more found parts do not upsto and withle of upsto stricte case V. the 1st of H. a upsto  
then driven consistin of very feeble, to estimate ulcer in a bot and, but, upsto, weined upsto  
to upsto admitted to upsto upsto of upsto of upsto a wish to upsto under to upsto upsto  
and thick also than upsto joined, <sup>is a sign that</sup> upsto large excrecences remain when upsto incourous  
isolated & then the cut off of as he <sup>is a sign that</sup> upsto good, with couduy and once fly, I applied a  
to base of upsto, consequence no more found parts do not upsto pure to resolt upsto  
but the excite and an extreme slough of upsto cicatr no pretes the upsto no ag  
prestes of the no ag upsto in (me dupis couduy as before but main of upsto die upsto  
of upsto of upsto not bridge ad have drop of to my upsto satisfied she am upsto of upsto  
a upsto the upsto have applied before it upsto agree the upsto upsto upsto upsto upsto

[illegible]



5 Had gained in strength & with some time till the prob had bene more firm of both able to resist the irritation, here had I applied more & more of virel wth into puer & the consequence? we must keep a steady eye to end of system in these latter down constitutions, we often see phlog. indet & more, but system is a such a cond. as not admit of mixing up. wth we rely to a permanent cure & I have seen a grt dloph. practice but we must first put system in a such a prob to raise it & tell them let the virel be its charge case extremely fble grt times grt diet & I was to be very much I exhort and exhort my doct. wth and on the p<sup>pt</sup> an uncom. susceptibility to its impro. & she ben purg. rivated wth I could not arrest her strength failure & Tho (in to see her gradually sink not withstanding all my efforts. but some of these <sup>old</sup> virel eruptive (ulcers) scintilla, bark & general diet answer very well.

Electric Levers.

*Hectic heresi*

[illegible]

If the joint is opened w<sup>th</sup> scissels instantly what we propose to do (just at present not in a case)  
but for how on it in power is subject to constant motion of <sup>motion</sup> joint. but sometimes it  
seems necessary to remove (do not to see) plant from vicinity of the nec most perform it. then  
we must chiefly weigh in our own minds (probably of system by able to be us yet the dog get  
quantity of (loss of a limb, if heatis continued, strength is such of me we do not be able to make an  
effort on / but do, these are / even motives in itself its travel / such cases, to attribute  
power / system will be seen loudly call for relief. Case - section of testis was in a closed  
state, such was constant motion that I had to remove them to see plant. I most positively  
rest on the conviction of the absolute necessity for removing a limb before amputation, the  
restorative powers of the system are very surprising of often when it expects by young surgeon  
Phym in his prime (not all his dexterity as an operator used to condemn listy of the os / degree of injury  
this sub operate till well convinced it is impossible / system to get them without amputation

### Wounds may be divided into incised punctured, entered or lacerated

incised wound as if been extremely injury being probable extent of not adhere things confine them & not amputated bridge  
union by good nature / after 3-4 days if motion or inflammation <sup>then much sooner</sup> wound firmly by stitches (wound  
as to practice as no really a punctured wound to an incised one of punctured wound are not so thorough & its  
wound hence a rule never use stitches when (not admit of) application of adhesive strap / a still more  
practice was to stuff incised wound to better / up to be by granulation this was antiseptic practice of (Murchison in Boston)  
This system <sup>but the very opposite</sup> of if this inflammation is too high or too low we know how to treat it.  
also in contused wounds we are to attempt adhesion of common contused wound, but do well  
under the most unfavorable circumstances. Punctured wounds may involve important cavities as those of  
at do well case stated by a wound (to spring) / being performed to us needed / did well, my penetrating  
wound of liver some days loose / it of in situ placed chest organs of spot / but / all right passed upon it he lived  
up of died Mr. Vintail Surgeon V. intubed manure by dead otherwise / H. H. might have wound / (pharynx)  
wound not penetrates of no entered my substance but not penetrates to its cavity / (only here in infant, who  
living to follow of adhesive straps / bands must be in exactly attached if in infant of ass. and not think  
exactly (tight) adhesive straps / bands shall be placed at perfect rest, if a limb it shall be elevated / so the  
wound <sup>to</sup> ought to mitigate its action / limb placed at perfect ease / I oft have punctured wounds of abdomen  
do well / (Specially abdominal punctures by sword uterine attached to diaphragm & removed up gunner / were  
not actually into abdomen / in his stool room oft no guilty fresh blood when at once removed (into the be  
do / (pharynx) was enfolded / cold cloths were applied to the abdomen kept perfectly at rest / not by tight  
with a piece of purple with / Adrenin he was thus rested for some days of recovery with any head symptoms

[illegible]

8) had I attempted to move, but being unable to do so for its <sup>size</sup> of pro-ducts not free  
it through as the large vessels not holding present I gave opiate & we slept out over lightly  
or turner found me all sticky in a cold but surprisingly extracted it, now I had a double  
of put to treat a trust of increased wind I had in the a curved spine & propped up  
to prevent all motion (elevated flow diet) and the body moved in a few days to the  
for 10 days for fear. In some of those cases no help for purgation & they recovered with an unplea-  
sant feeling, when in fact do some then help let us help to prevent it & after removal of abdomen  
the first injury is, hospital had a host of it but he patiently will to have it cured

Sacerate wound. but if extended & complete lesion this is not much longer  
Some times injury is so great as to render the patient <sup>very</sup> early destroyed but both the <sup>very</sup> early places the only  
remains to report the high (sooner the better) (though of patient permits of it) when a very one  
divided at the are some exception to rule that most of it will result when all possible efforts  
are divided, a good but remember (very top) none of surgery consists in saving limbs & preventing  
amputation, ease illustration, sooner than when it is required see Method limb of amputee page 34  
of gun have limb ought to have been cut off immediately <sup>when possible</sup> (but the reason  
both are extremely needed. a good he arose when it is proper to amputate and for not till (system  
reacted. My opinion is it is best to wait a little till with energy he recovered to bear the post-  
operation. (I wish the patient <sup>might</sup> not my recovery) though I can when we are in a situation to read  
else yet the is alluded to the circumstances of the lower by which a copious place to his foot  
right in week & doubly tested & may be very easily made, have up to three (In those cases the first  
injury is what is state of arteries enquire whether they are safe. As his condition extremely poor  
no place in leg he was unable to sit & could not stand a good deal & 2 hrs (as he did not receive) (I have no effect  
in some cases of blood still more react with again in afternoon and react & was propped up & propped up  
table thought at first he refused to consent to operation yet he afterwards agreed when it was announced the  
first ~~hand~~ <sup>hand</sup> arrived by (with promise of his friends) we withdrew a short time on our return he was  
low that he to postpone operation to see his friends view that the of his case as before he thought at  
of held he (loss of leg) he had no hopes of dying & obviously (dying) but he was to be propped up  
mind, showing effect of mind upon body, at night a patient determined to operate & no react  
the place will to operate with regard to mealiness but to get clear of limb as quick as possible he was  
able to operate a patient when he was found almost pulseless we persisted & he died under  
knife he was returned to bed & lived over for 10 days & died.



[illegible]

13 on fracture of neck of femur exhibited 2 specimens when union had completely the place not a bone of  
(supp. with epith. lymph. or long it) } Bone union often at the place but often <sup>the union at unity</sup> adhesion that the bone is very aged, it is often  
but to be split of by union & to be at right as a joint case. It is directly from management union of the  
place, this accident is frequent among aged <sup>the hip</sup> & a trip in (except he falls on the hip) & has got him unable to move  
limb of almost every out of on its by movement the foot is turned almost involuntarily outwards. It is from a rupture  
some but 2 specimens (it is not true in hence must be exceedingly rare) I have never seen it, & all these may  
include this is fracture of the neck of the femur but this is little or no shortening of limb, and is to be treated as for  
of thigh at any place lower down. when it happens extremely aged on not expect much rest & probably they will  
a while but never rise from the bed. 2 cases at the same time 85 yrs & a trip in (except & it is not true out  
shortening of got him on many limbs they do not submit to splints they do not be so confined & limbs are whole & joined  
very aged will not submit to splints they do not be so confined when this is case it only admits of palliation. you  
of the meet not to split of each of limbs be acquired not it. lose by fall on ice up - hip is unable to rise  
for I saw him next day the wound short, the foot not injured but got him unable to move (limb are included it not  
of neck or head of bone leg very aged he refused to submit to splints after several weeks some ignorant persons came  
of probably a proof it to be fracture when to a man as quite not natural stretch of pot the was not a single sign of fracture  
such a report of with comely not poor physician who says (that if who might have given him the knicker  
case) what extent of extra extension was not well as must have effect of gut all of (try to put) he finally died of  
suppose of it proved to be complete fracture of head of thigh bone, (syndesmodia was broken off neck just what is un-  
and a small fragment of bone was found loose in the joint. Case happened to me a fortnight Case fall on hip  
foot was in precisely in same extent no shortening (limb) what he on limb by moved for antel post I saw  
fractured just off head of bone & I saw case profusely bleed not only that but with a profuse & he wound the wound exposed  
had more (12 inches) of splint after when the body recovered of us with a lot of threats. It will be in  
after he died to obtain bone of ascertain with union of. he came the place at present I can not determine  
if it can or not be inclined to blow it in from this case, but very difficult to do yet with only  
about hip or fracture of the fall on these parts, here I treat as precisely as fracture of neck of femur to tell it & see  
difficult to tell with the fracture or not. I will tell it as if fracture of if it is not the true, well still be proved will be  
in few days. Case fell on hip (unable to rise) got him in hip when by moved & what extent of pot, the  
of and when included outwards in fall of hip - one of out of pot, tell of fracture but after splints in complete & he  
after a while to, confirmed proposition it seems easy to get out of hip. The limbs feel them easier not extent of limb than it does, with them  
well as it would be to be in urgent extent about hip. The one accident of app to neck of femur  
have seen it in very young persons & it may be in old & this case, here if except of all persons be  
to determine (acute & case) if in one case I was concerned in my estimation & during this time soon per-

[illegible]





[illegible]

[illegible]

It is in every respect to be desired that the inferior members of society should be made to feel that they are not only the subjects of the laws but also the makers of the laws. The more they are made to feel that they are the makers of the laws, the more they will be disposed to obey the laws. The more they are made to feel that they are the makers of the laws, the more they will be disposed to obey the laws. The more they are made to feel that they are the makers of the laws, the more they will be disposed to obey the laws.

to be dried & worked out. It is highly <sup>23</sup> important to commence stimulating & stomach mostly  
with strong food in one case when we were very successful all the stimulants were  
improved. Scrupulous much while with out stomach. But this might be now delay. But  
hopeless spirit rise & high & it is very common in such circumstances to be when it is true  
to be but when you have tried in work out the stomach you this beled cautioning  
at all <sup>19</sup> remembering the gro-daily which is likely to follow if it is not used. The practice of  
very publicity to such events of suicide, which it heightens already troubled mind of relatives  
is calculated to do no good but rather instigate & tempts others who murdered persons to  
murder <sup>20</sup> of therefore medical men as a body this set themselves against it. Dr W  
wrote to me that a few days apt to come on even oftentimes to be effected in the spirit of  
of oftentimes I saw some in case in groups of in a case of the city of Detroit not to let sink for  
of stimulants they were all persons before themselves who had finished & finally very late in place over  
of & as due we kept very busy empty to in preventing study state but it came on of our very busy not  
trust. evotion the react us in (in new case <sup>21</sup> plethoric & the worst slough or inelly  
only, stomach of the night out laid in when burns old settlers of a sort of settling pping out  
to do my best to destroy life of an infant. In children a common <sup>22</sup> uterina  
thats will answer, this almost criminal in an apothecary to sell laudanum off of bottle in which  
been made innocuous of drugs liable to remain. When we are called <sup>23</sup> (plant is already under  
influence of laudanum so that <sup>24</sup> tarsyns is quite in senoble to worthy towards close of opoth. The  
much count as <sup>25</sup> ~~throughly~~ <sup>throughly</sup> ~~up~~ <sup>up</sup> ~~has been~~ <sup>has been</sup> ~~against~~ <sup>against</sup> ~~disappear~~ <sup>disappear</sup> ~~of~~ <sup>of</sup> ~~causing~~ <sup>causing</sup> ~~him~~ <sup>him</sup> ~~to~~ <sup>to</sup> ~~his~~ <sup>his</sup> ~~opoth~~ <sup>opoth</sup> ~~of~~ <sup>of</sup> ~~blue~~ <sup>blue</sup> ~~gills~~ <sup>gills</sup> ~~not~~ <sup>not</sup> ~~of~~ <sup>of</sup> ~~it~~ <sup>it</sup> ~~will~~ <sup>will</sup> ~~dever~~ <sup>dever</sup>  
it may impate it will attend you may from the <sup>26</sup> ~~with~~ <sup>with</sup> ~~polyps~~ <sup>polyps</sup> ~~of~~ <sup>of</sup> ~~most~~ <sup>most</sup> ~~for~~ <sup>for</sup> ~~ble~~ <sup>ble</sup> ~~kind~~ <sup>kind</sup> ~~not~~ <sup>not</sup> ~~a~~ <sup>a</sup> ~~narrow~~ <sup>narrow</sup> ~~neck~~ <sup>neck</sup> ~~of~~ <sup>of</sup> ~~moveable~~ <sup>moveable</sup>  
thats & <sup>27</sup> ~~stomach~~ <sup>stomach</sup> ~~but~~ <sup>but</sup> ~~or~~ <sup>or</sup> ~~to~~ <sup>to</sup> ~~septum~~ <sup>septum</sup> ~~and~~ <sup>and</sup> ~~next~~ <sup>next</sup> ~~to~~ <sup>to</sup> ~~each~~ <sup>each</sup> ~~other~~ <sup>other</sup> ~~to~~ <sup>to</sup> ~~gether~~ <sup>gether</sup> ~~some~~ <sup>some</sup> ~~from~~ <sup>from</sup> ~~are~~ <sup>are</sup> ~~very~~ <sup>very</sup> ~~liable~~ <sup>liable</sup> ~~to~~ <sup>to</sup> ~~them~~ <sup>them</sup> ~~Dr~~ <sup>Dr</sup> ~~used~~ <sup>used</sup> ~~freque~~ <sup>freque</sup>  
to opoth on himself not a few offsprings for a looky glass. The most forble kind are very ofent from me to bear  
force of extraction then for a small shell of bone can be extracted with plps of the it will not be liable to return in  
we please of by moveable. But they are mostly very soft & broad only the common method of exty is with a  
lips forps taking care to push forps as near base as possible of them giving forps a slight twist pull it side  
lips & not very middle of the this is always <sup>28</sup> ~~hurry~~ <sup>hurry</sup> ~~in~~ <sup>in</sup> ~~the~~ <sup>the</sup> ~~very~~ <sup>very</sup> ~~pipe~~ <sup>pipe</sup> ~~or~~ <sup>or</sup> ~~cause~~ <sup>cause</sup> ~~of~~ <sup>of</sup> ~~all~~ <sup>all</sup> ~~the~~ <sup>the</sup> ~~orgn~~ <sup>orgn</sup>  
not be allurmed at a shell of bone to extract but is very forble. I have seen empty. But not forps  
is no or less <sup>29</sup> ~~leaving~~ <sup>leaving</sup> ~~of~~ <sup>of</sup> ~~medicines~~ <sup>medicines</sup> ~~in~~ <sup>in</sup> ~~the~~ <sup>the</sup> ~~very~~ <sup>very</sup> ~~for~~ <sup>for</sup> ~~ble~~ <sup>ble</sup> ~~Dr~~ <sup>Dr</sup> ~~has~~ <sup>has</sup> ~~seen~~ <sup>seen</sup> ~~empty~~ <sup>empty</sup> ~~but~~ <sup>but</sup> ~~not~~ <sup>not</sup> ~~forps~~ <sup>forps</sup>  
except a <sup>30</sup> ~~small~~ <sup>small</sup> ~~canula~~ <sup>canula</sup> ~~of~~ <sup>of</sup> ~~meine~~ <sup>meine</sup> ~~ly~~ <sup>ly</sup> ~~with~~ <sup>with</sup> ~~you~~ <sup>you</sup> ~~can~~ <sup>can</sup> ~~get~~ <sup>get</sup> ~~near~~ <sup>near</sup> ~~er~~ <sup>er</sup> ~~base~~ <sup>base</sup> ~~met~~ <sup>met</sup> ~~forps~~ <sup>forps</sup> ~~of~~ <sup>of</sup> ~~the~~ <sup>the</sup> ~~enlarg~~ <sup>enlarg</sup> ~~tum~~ <sup>tum</sup>  
ten <sup>31</sup> ~~meine~~ <sup>meine</sup> ~~pull~~ <sup>pull</sup> ~~it~~ <sup>it</sup> ~~away~~ <sup>away</sup>

[illegible][illegible][illegible]

[illegible]

from an or bony cavity; I draw off it a new of destery, not to get the real piece of bone, see  
at once but I prefer taking any extent to the first, then in work not more security on interest to  
10 John said just try the finger pull it away not great caution, and in doing this care not to press  
or turn edge of bone to dura mater but extract it slowly & horizontally, as of the sharp spicula of  
of interest table with an apt to extend must get the thin extent fracture by incant's extract of these ext  
drawing the out with a jerk & obliquely at moment of pulsed of bone (dura mater will be measured by finger con  
the very last man who shall be inflat such a way, & to a spent extent to prove. All of that D. P. says  
11 Head of dura mater must always fatal except in a few cases he saw in young subjects, 12 The  
if a part narrow part of bone be depressed, extend it place of principle depression, where the extent is separate  
a part of bone, to get at this they are best of the bone, extend (saw it first perfect in a oblique  
along, depress bone using a very thin spatula. The very place, count down into it can be done  
with much abuse as part of a healthy spotted & when nearly through try to raise, sawed part up, not de  
of this part noon will be proud to elect, extend. 13 Depress bone when must be done not give cant, ext  
plants, by finger fingers then round the edge off, give no rough edge that might irritate, & not in  
pulstus this wounded off 14 D. P. says remain in place of part as much as possible some thing it was tried  
to is no practice to adhere to dura mater. 15 Afterward treat them symptoms as they arise  
the prognosis in these cases is always dangerous. If the brain rise up turned, not pulsed, pr  
what depressed has been removed it is very unsatisfactory. 16 But when brain is found pulsed, it is  
this part dura mater or not I shall in future consider. 17 But when brain is found pulsed, it is  
yet such injury may have been done to the dura mater, or to cause what inflat & part of even gray  
and mortification of the part, no not be very successful soft in in hands. 19 At present the  
senses or the spinal artery are not apt to progress, & not provided the bone be depressed  
over them only more care is required. 20 it is not possible to operate low on occipital in  
it is of great use, we must get the thickness and inequality of the bone, let the place be over  
a case of fresh abscess consequently I can not determine for my opinion to operate it  
be very rare, I should however, dura mater may be made by carefully with help of my  
the dura mater may be seriously bruised so as to slough.  
Washing and the stomach the mouth will be most direct & ready passage into it  
for the more what resistance, give off by their intent on self destruction, they will unduly  
if late recovery, let us then select a passage over which the patient has no control.




and at the same time united by bony union 19 & cranium not but off more terribly de-  
stroyed not partly absorbed in many places of entry though others have on front for small of the  
the history of one Dr. Spurr himself acquired & was produced by tumors, tumours firmly bound close  
to cranium & thus indelibly abrupt though I have known tumors remain long time with prodigious  
any such effort on self. I perceive of long continued vessels, cordly light of a pin like bony could  
and all estimate especially Injuries of the head The first object of consideration  
is the connection existing between interior of cranium & exterior part where by injury inflicted external  
injury inflame, may travel internally & produce serious results. When a patient dies of apoplexy or  
by in middle of head the doctor per se & do not always find any adhesion on top of the off means pub-  
lics well absorbed & estimate of the vessels the the close and the connection between them: On convulsions  
for a time are not (sufficiently) extinguished. I am sorry to hear, he recovers a blue, yellow distended, faintly  
with status brachii, pulse small & soft almost absent, <sup>not</sup> frog of bile, cold, insensibility, after the first states  
recovery, the pulse will gradually acquire more strength, but fear perhaps or is perhaps well.  
but the concern is severe if it don't go off ready dis followed by limbs, evils, the pupil is un-  
stimulated but not contracted case like by nearly bright knobs during the first stage, or convulsions and  
system reacted acute dilated for me days with however <sup>subsequent</sup> ~~too deep~~ under pulse turbulent  
but it proves fatal in a patch manner convulsions by induced for months of a small or by  
pupil. On convulsions the slow pulse of plethoric pulse the is pretty uniform symptoms of  
yet considerable intellect may account any accident. The pupil is not usually dilated  
for I have seen it as often <sup>in</sup> contracted. There many exceptions to order of symptoms laid down  
in books on this and on many others. Apoplexy Case a boy fell & fell off his horse & slightly  
injured with bone of no injury & could talk with his head & but has some good & in mind till  
older full of improvement. I wish don't do the place & use for it is for a part of one of the  
on bone case Man no knock down - falling & got up & used his hands to his antagonist he with  
a bit & mile of good in state & died in the here got off by <sup>arose to</sup> ~~at first~~ at first to his antagonist he with  
as he was known to be under intonation with prodigious strength & emulsion he died a bit & in  
case of spirit man fell & died & this Henry they hatch away of his stomach on readily & closed to  
for though unshaken yet his great remains of intellect to let store go to the bottom of

24  
 24  
 24

once I was called to a by my snuff (the esophagus) a poor stone it had  
 pletely passed out of view I scunt immediately for an elastic means on nitro  
 my gun I could just bring gun in contact with it & properly enfolded it with, surely  
 indeed stone cast up & said when ogh to pass bone pass into esophagus it  
 be in power to force them down into stomach w<sup>th</sup> probability as a good mischief of lacerate  
 be proved as it might have sharp cutting edges in these cases it would be better to tell  
 patients not to eat of hot emetic till vomiting is induced & thus less mischief would be likely to be  
 to parts, but sometimes can not wait for operation of an emetic, it would be  
 too long if patients might suffocate as in case of a large bolus arrested in oesophagus  
 my experience on trachea & impeded entirely proving respiration has occasionally  
 & and when forceps are used no injury should be made, lap a fist bone & far down not  
 by means of a very long & delicate forceps. but I have a flexible metallic tube not a prop  
 within it not open when pushed out & shut when retracted within tube of thus my off be  
 dyed down & ancess of secreted body. Of larynx (all though I do not greatly appreciate  
 probability yet it is the possession by every age as probably there may be cases in which it might  
 of service) The symptom of effects of larynx are of 2 kinds immediate or  
 chronic. Of Father a gullen not blunt & round cough for 6 months so far was caught  
 old not to operate on might be no more of cough up something unusual of harsh  
 prescribed morning found to be a piece of top of green pine enveloped in mucus when he made  
 recollect & even then of case one time before chewing a piece of top of pine as he was  
 thing pines, it suddenly slipped down by wrong way of exhalation of cough & in fact the bit  
 abled for a while the entirely lost sight of circumstance till now. after coughing up  
 ceased & got well case not to be forgotten. In a violent cough for 6 months she died suddenly  
 her throat let to us, not attend to over belied as she evidently had also phthisis a few weeks  
 in a spell of cough threw up a piece of rope. In the afternoon we heard of the violent paroxysms  
 phthisis went on & died a few weeks. In a child who got coffee off today in a nutcrack of it not used  
 become inoperative of coughs. what of a mild cough one day cough up a nut & was much  
 relieved sometime after remained, no coughed up & entirely cured here last port  
 never been been lodged in a one leg & still in situ than first. Case of a man put a  
 lung in for with only passed into larynx & cough got down to cough, & in a nutcrack of it not used  
 of a woman's to be traced with it was only lodged one day in fact of sneezing here (diaphragm)

your interest in the cause of the oppressed is the only one that is not selfish. It is the only one that is not based on a narrow and exclusive view of the world. It is the only one that is not based on a selfish and exclusive view of the world. It is the only one that is not based on a selfish and exclusive view of the world.

the place of Hepton may succeed when it answers the purpose. The bony surface. The hospital of estomach tumor should be seen project into with when opening a small or  
propagated below eye of an impulsion given to tumor in interior communicated to one on the strong they a  
corner of putting and put out of action. Thunberg from nutritive sometimes answers  
a good purpose but is profuse. Then elevating head of a side apartment. a snuff of fernum macula is very  
useful but it is a purgative and on sea of gum arabic or resin & galls is not very useful but not all most  
faintly it is necessary to plug up nostrils. For plug of cotton wares a thin camella covered at one extreme  
we attached by a small string attached at the end of a short head project into hole is placed through inferior meatus  
of the nostril pressed in with finger springing out of mouth or it may be the head of gag or cap of tooth out of  
mouth then a piece of sponge cut  to fill up nares in a wedge shape not then certainly introduce  
first thoroughly secured to middle of a long piece of twine one end of twine is fastened to instrument  
with a piece of nutritive moistened with oil of sage sponge is drawn firmly into nares so that it is in contact  
behind of other end of string is not high to the throat nostrils of all kinds had more plot to slide off the  
this string is to withdraw sponge when necessary in one up (act of saline) and destroyed twine that  
only broke let by drops (the point is seized) extract sponge of anterior nares may be the nutritive to  
of this nutritive cases I have read where all other means failed. If in points of anterior by ex. that preparation  
is absorbed from the portion between eye it soon pushes forward eye & makes its way to brain &  
describes the septa of bone the preparation itself of plant dies & is light of exposure. Use of it place of  
faint if the is not spoken that does not enter. Optum (optum is uterine out of action) (most eminent) or  
garg. refuse to operate for cancer where glands of axilla are extremely enlarged and in plugs up posterior nares  
or in apply sponge to avort humors & extract of filps direct attitude at all point if any interdiction of body is exposed  
quickly to drag sponge out. Fossils these are subject to son influence its & torpidity & occurs mostly in  
children or to a slow or no influence this may occur & all in infants a good mother's sympathy for and avoids  
I all efforts to avoid it are ineffectual of the torment in spot now especially if it are inflamed this is good effect  
of body of as soon as pus is found get relief by lee of pus by puncturing by a sharp pin & later well protected  
not free radius to near its point then open with deep probe tongue with a poor puncture gland of frog with a poor  
punct is not of itself large introduce & later and enlarge it of this get relief with lee of pus. but have done it  
dams exists, and this is got of itself in these cases & open with will but if finger can be introduced & brought in  
contact with tumor (exposed) take in only detect if pus is present except if spot be at most posterior part of  
gland when finger can not reach. These two of a case when it was opened early no wound in the spot but the accident  
it has it has got out of my except by a small white & red & thrust of knife, on open with deep probe tongue with  
specks with up on tonsils which must not be so far found & ulcerate of tonsils, this is only a sign of  
aggravable lymph. and scarcely in very distant & very so that black & sent time all ready it will be brought  
I have known succeed in able only, it is important to be guarded lest in withdrawing its tongue might be  
wounded

[illegible]

Feb 27<sup>th</sup> 1824 In Hylan a silver wire not a spear point, leave needles till  
dy. Introduce of steel into stomach but only affect to introduce into stomach as when  
introduces it into glottis, and also escape stomach as well as length of tube & tool  
is sensible at its origin. <sup>January 5<sup>th</sup> 1825</sup> <sup>with continuance of reason</sup> The tube led to make intestine effort to  
avoid a <sup>unintentional</sup> ~~error~~ <sup>with continuance of reason</sup> The tube led to make intestine effort to  
back but that night <sup>unintentional</sup> ~~error~~ <sup>with continuance of reason</sup> The tube led to make intestine effort to  
of the put, the glands died of which I thought introduced in my eye in paper. The next day of  
with poverty dear, as to efforts to avoid, up Hydrophobia, died of it in the eye. The  
involuntarily went so as to need to die, Dr. W. H. H. is with, of notice as  
the it is that cause that died of which I thought introduced in my eye in paper. The next day of  
children play with gun of the cherry stone & of points with allowed & mostly more simple  
if not lamp of the eye, the eye, whole eye not involuntarily so as to enter through  
eye & behind over substance of in a moment is extracted. If far back, sleeve  
more entirely 1815 of eye, extracted, died of use, but extremely offensive to by eye  
into of introduce piece eye to make hand of sword & extract, clear with I do not  
understand <sup>callos</sup> ~~error~~ <sup>with continuance of reason</sup> The tube led to make intestine effort to  
draw out my finger it find much of it placed <sup>callos</sup> ~~error~~ <sup>with continuance of reason</sup> The tube led to make intestine effort to  
in <sup>callos</sup> ~~error~~ <sup>with continuance of reason</sup> The tube led to make intestine effort to  
over eye since by poultice not touched over eye not little callos. meat

to safely damaged here my wisdom to <sup>loose</sup> not mella of (27) a spoon. or if this does not succeed as in the  
man to, and I ever so much doubt that I enclose a very large map in (loose) wire let it be attached  
to the edge it got safely as expressed, it was left till next day of patient suggested that if wire it be  
the by of the cut off the cordage, wire was pushed through it to be cut out not being  
for of then it is as we observed to get extent of only loosened the part suff. more to loose of wire  
the first apople. in some of those up of intellect only of just plain in which body is so affected especially in  
that a thing unaccounted to its body will be allowed its body of which it is the body down stairs.  
get objects to be attended to in the spot are then let him be spent for, doct. that to go while not going  
to the wire. let wire be of spent length had it from what drug were, leave wire on till turn ho through.  
down wire next annula and her teeth, young maintain its state. This is of opt. I always prefer  
to hold on as the mouth is small & parts not well developed & very vascular & if large should be undecidly  
than than with knife or scissor let inner cord opte in the with those instruments, hands be got safely coming  
surge. they will be disposed to gaze, that must not so in, gently with every thing will be done to give any  
for their safety & as parts are so vulnerable <sup>must be kept in mind</sup> with malpractice I prefer to try with  
if or scissor in these just a small hood push it forward in 1/4 I saw I opte with knife for no  
the complaint or a part of the of the horse in a worse enlarged testis. Decmbr 30<sup>th</sup> 1825 this  
probably last lecture. I deliver this year. I write with much earnestness in prose every blessing  
of my beloved, much respects precept of his family long may he live to enjoy his the grace  
of industry & cultivate mind & share not his family the blessing of prayers of his welfare  
rescued suffering humanity Indeed I feel a gratitude glow in my mind towards this hu-  
man being & christian <sup>man</sup> that shall never cease lent with my existence. when I count  
his character as a surgeon & physician I indeed am constrained to admire & extol him just not  
viewing my connection with him as a pupil & call to mind (28) really energy in so many eloque  
and atty. eloque - his doing unremitting efforts to convert minds sound of useful principle  
and just errors, his endow. liberality in <sup>in acknowledging</sup> our minds theory of his own  
to tell us what he knows, not what he thinks I am induced to never him as my father  
in medicine and to crown the whole how amiable & exemplary is his character  
a christian this gives a sup. lustre to his christian, considering it infir. tends of feeling & suffer  
others, mild in his manners to all, <sup>compassionately</sup> gentle & abundant, of most perfect veracity  
actual in his engagements, <sup>not how - devoted to others</sup> cautious in his counsel, firm hand, very fly in his prompt to act  
an opt. & good judgment, & of an amiable prospect in his family, such is a part  
his excellent character. May his grey hairs be a crown of glory to him  
<sup>hereafter</sup>

Decr 30<sup>th</sup> 1825

Wm Ashmud

[illegible]

1826 Aug 28<sup>th</sup> month

after getting quiet full do not bring more gently from till she wakes in  
month to see what has happened. Some of those who say a pretty twinkling are

so when you are called to treat them. The head gland has many glands is a body

to take secretion of the system and does not point out the gland is removed

of the system and the gland is removed. When it is removed it is removed

to be quiet and the gland is removed. When it is removed it is removed

to be quiet and the gland is removed. When it is removed it is removed

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to be quiet and the gland is removed. When it is removed it is removed

to be quiet and the gland is removed. When it is removed it is removed

[illegible]

[illegible]



[illegible]

33. The notes by 'Lepidoptera'

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible][illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

Osella is free that there is hope of relief go (46) it is still a local affection (7) at once I make  
my mind it is a natural disease no man ever an cure (8) but opposite  
unfavorable progress but if we could remove all (diseases) glands which are or touch it detect  
to give probably held them in 2 yrs (9) I have got all of (malignant) experience (9) There no doubt if really  
free it the tumor (10) but freely & fully improve (11) but of the shore to the (11) with  
a removal of disease of a kind of (12) tumor only might be removed. (12) explain I could get the  
patient decided (13) I have idea of constructing a simply (14) that to want to an (15) they  
not fear (16) (17) have we reasoned (18) that one no (19) advancing to a set of (20)  
the (21) of (22) of (23) (24) (25) (26) (27) (28) (29) (30) (31) (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)

[illegible]

[illegible]

fringe contracted not be much less than it would still exist in a small Dr. (Saturday) It is often  
seen a cataract along with strabismus but it does not prosper of itself and is very little & the cataract  
is it alone to remain even when all is perfectly transparent. It occurs in adults & also in early life. It has  
been proposed to endeavor to remove cataracts by early & absolute. There is not slightest confidence in the possibility  
of long continued depth by early press. We did for you can do no good & you do no injury to the  
constitution but when it arises from pure injury I think my attempts means to produce absorption  
the slow or speedy of lens or opake. I also advise Vasodilator with it not but any evident cause.  
The lens is often soft, but the very fluidity of it may, on the other hand, I believe, prevent it is impossible  
to detach whether it is hard or soft. & the perfect transparency in the healthy state, it is impossible  
to determine whether cataract or lens be opaque if it is of no consequence in operation we would  
not attempt it, & the object is to remove opaque mass out of sphere of vision. Whole there are  
for it, especially strongly be I must acknowledge a number of eyes were kept by the same thing in reports  
of that of the child's eye by lost by method of supporting it in glass but the instrument & the report of a child  
of my study has even I this with has been a most skillful oculist well not operate but not sagacious & his  
instruments are all (signs that) really take spots with such instruments I do not say it without reason it is  
does. but object is to reduce opacity to opacity of a moderately white organ of the eye & the use of any  
of pretty that kind of such instruments as my index be provided as with the two defects of the patient  
depression. And they may have not kept the child of the patient. (But our opake & cataract & cataract a tooth  
and the all wrong on both sides of injuries. There I believe I operate of the eye we not not go  
if a little too much pressure (eye will be lost or that by a few of early or only & kind of patient (which) retro humors may be  
loss of principle of the eye are (good) word of Adams has operated the eye patient no when object was  
lept at the end of the patient. Adams reminds use of a small knife & early up lens. And I have  
meant (early) recourse to operation of the eye & cataract as it seems in impossible by continuance. The  
operation of Adams has not been given and I strongly are to be 30 years old by operation of 2 other patients  
of Adams was so slow that resorted to operation of cataract, thus the want of good practice.  
I now let let eye by inflamed operation that is such a number of (least) injury in the eye & cataract up in the  
material like a patient as pressure as he to it. In the operation it is exceedingly important not to do too much  
at once & that all has been done also (days of luxury) (any other lens of days of its vision). We let not no pressure  
with lens is not what if it does rise if you can be sure to replace capsule it may rise & thus obstruct the eye but it  
showing be absorbed let it goes on too slowly it may require a 2nd operation. But it is followed by inflammation  
putty severe let it well & cataract by prior removal. And the days prior to operation only after to (but  
to have than operation of all of all these which a little under the eye & let not too dice and a few has been  
the operation I give an opiate it tranquillizes mind & gives less especially to having less (days of inflammation)

[illegible]

[illegible]



[illegible]

[illegible]

[illegible]



If opote nor the short seg intrud side sack the Fed case  
clap of opy sack expre pertent of two side in my Vopet of ante  
up but that clap of overlaid by bufit. At be doo by opote V buol,  
not mine the free status not V impet & que de no streret  
be mist on gas streret at intrud ring

It would be too rare so it proved what potent influence, depth as far  
 Apple, fiddle and other direction colon dark ellr birch coat abraided  
 part of caton networked adhesion and orientation <sup>living</sup> ~~natural~~ here &  
 observe the part he dreaded was only <sup>it influence</sup> influenced by the part  
 at present concerned

in sack and water as they resulted rapidly, they gradually applied left  
 life greatly destroyed many esp. effectual. Object is draw colon & down & causes  
 & distress another see very large irreducible oment hernia and this got  
 segment do not always occur the way routines happen, Dr. Sp. pto  
 longate themselves to accrete pto.

Lecture February 25 omitted.  
 Dr P. concludes his winter course of lectures on Surgery

Those notes are necessarily imperfectly taken, <sup>Wm. Ashmead</sup> especially the  
 cases are not fully detailed, which failures I hope to correct the  
 next course of surg. lectures. The Dr. laboured with fervour and  
 with much energy of delivery, to impress on our minds  
 many useful truths the result of his own <sup>observation and</sup> experience and to point  
 out cautions where otherwise we too might be led into dangerous  
 mistakes. The energy of his delivery and the pleasing manner of  
 his address together with the conscientiousness with which he  
 discharged

latus ad  
guttula

the people  
 as if you  
 nation  
 not then  
 reason in  
 in the  
 all under  
 we be g  
 to dem  
 in insti  
 this per  
 applica  
 much m  
 the m  
 do all  
 strange  
 was m  
 in 1700  
 lines of  
 of the  
 text m  
 with ob  
 the  
 in. v. m

his duties as a preceptor, gain him the sincere affection, respect<sup>47</sup>  
and gratitude of his pupils Wm. Shinnard. 1824 & 1825  
numerous claps

A long, narrow, horizontal strip of aged, yellowed paper with faint, illegible handwriting. The strip is torn at the ends and has a dark, irregular border on the left and right sides.

1. The first part of the paper is a list of names of the persons who have been named in the various reports of the committee. The names are arranged in alphabetical order, and are given in full, with the name of the person to whom the report was made. The names are given in full, with the name of the person to whom the report was made.



[illegible]

*[The page contains dense handwritten text in cursive script, heavily annotated with marginalia and corrections. The main text appears to be a personal or medical journal entry, discussing various ailments and treatments. Key phrases include "some R.P.", "dark blue & brown", "Feb. 23rd 1826", "Erysipelas", "hernia", and "strangulated". The handwriting is very fluid and difficult to decipher in many places due to the density of the ink and the numerous annotations.]*

See page 2 of this sheet (1) but we try to enlarge considerably the structure let I say the  
note as modelled but so well understood as now. (2) a good often my fear in doing  
inspection of hence bent dead by p.p.s plates and here birds lecture. Structure was just  
only after me time after structure. By looking upon straight cutting, quote of intestine  
highly inflamed & a mass of equal lymph could while inflamed bowel detach the very true  
serous net bundle helps keep meeting bowl. Salvary effort to really separate by whole self  
clumped (3) and how shall we know it. The why else is at about per of the coat  
(4) and a mortified bowel has a certain aspect <sup>by</sup> to exposed red detached.  
(5) if prepared part of no all sorts of ellr follow, is of abnorm of swell. & end again  
mortified ellr of prob but if left a strong firmly round sign I mean this and  
the circulation & then cut it off now owing to long stagnation in vessels  
that present in a mortified state pressure will not cause change of ellr I mean  
tell up to the time to recover their action. As it is <sup>the</sup> a tightly constricted bo-  
weaving to a mortified state and as notes in one or the other case is so different  
it is of vast importance actually to know if is dead or not (6) we got to  
to do? Thus change of ellr or prope of living ellr & Botm ppd mortified page 3 (1) and  
the structure is quite made quite an indentation in intestine (2)

[illegible]

Life remaining if need be it is not menance of disease. 2 59  
Declare my patients to be solely as good as the d. hernia of urinary organs  
in other d. you have time to consult authors but in the present the book  
be prepared & facts which you must meet & which books of a layman are in no  
other is now time & reference of what we are told on in haste to a man who  
is apt to be already but left to almost of admits of no delay

Be not deceived in cases of apparent redness

If you operate all always open (back), & stretch my be actual in the thigh, tumor be  
redness of all stretch my continue

Recent hernia is in degree, & is in its extent than old, long stretch of small  
more so the large as stretch is apt to be tighter

Be not deceived by discharge of the bowels only to find of stretch or gutta of flatulency  
but my be gutta large gutta in bowl below stretch of one my be insensibility by infection  
in 1st & large gutta of the bowels yet get strength exiled.

Forget my exert not give or move of (symptoms) of to a very great extent, as all the  
symptoms not gut where my be present when but a small part is involved. ~~of the~~

~~of the~~  
Operation March 8th 1826

In inguinal hernia I incision not a common scalpel commencing  
one distance above ring of testis down over tumor, cautiously with a  
not hand not try fully on knife or it might plunge into back, then coming down  
to find of central oblique above tumor this is a guide now dissect over tumor  
ring edge a little directing not cutting with edge perpendicular on tumor (4) till the  
back is most widely exposed. then if there is considerable of one part of back will be  
prominent then (saw) here back is the opus. by a fine forceps pinching up a  
my small part of back and not a sharp but a good cutting with a small opening

but / chief cause of stress will be found to be the transverse fibres running as  
like pack thread / (one as transverse fibres connect 2 columns of my / up part  
the extent very) & - do esp being my story & divide these in such of well  
- come / chief cause of stress. The whole spirit should be due study / cautiously  
reflecting as you go This is the last lecture that I perhaps shall  
hear as a student. I / lips of a Dr. J. P. Prichard a skillful humane surgeon, much  
much respects / ever esteemed friend & teacher, nor will he come be  
to my recollect. At last / his last emotions of gratitude & respect. It is not  
a tear of regret mingled with prospects of brighter fortune that I now  
/ peaceful wills of instruct for / more busy / turbulent scenes of ac-  
life. with regret I look back on / years which have so quickly flown / have in  
for ever past yet not hope I future pleasures taste. Thought unmin-  
say I'll to that of us mortals create. When I reflect on / night / responsible  
which I am able to assume I feel / inefficiency of my own unaided powers to  
accomplish so great a duty yet & encourage it is said search / ye shall find  
of our powers to a certain extent men in proportion to / magnitude of work  
calls them forth. Towards my professors / preceptors I am bound to entertain  
respect / gratitude / thankfulness / my advancement in knowledge / towards our heavenly Father  
my mind should be / I do not need / gratitude / as / only return / I must  
do duty never / his kindness / so immense I should labour all in my power to benefit the  
rest of his children my brethren of mankind of thus shall we secure his favour  
guidance / protection / though oft / roughed / many oppress / of peoples sense  
life, though aim got Mediator of Redeemer. My mind dwell  
not pleasure on / past / I not pain it turns to think it is no more  
yet I can say that I have been diligent in my endeavours to make / use of means  
of improvement / offered me that I have not succeeded / solely to my

to my wishes that my friend express the <sup>62</sup>affection of my respected teacher  
has given me his testimony of his entire satisfaction of my conduct & attainment.  
certainly it is desirable that he should be respected by wise & the good.  
I am conscious of deficiency in many respects both in morality  
& medical science. I feel then lament over them & my I be enabled  
by divine providence & grace (Vah how weak are we) to flee every  
thing that is evil & to make a wise i.e. a diligent & judicious use of my time & oppor-  
tunities & advancement of my knowledge & with time I must one day render up  
an <sup>strict</sup> account before that awful tribunal of justice, in presence of  
an assembled world. I commend myself into thy Fatherly care  
& protection & see me & deprecate of sin & my own weakness heartily  
bring me to that place of everlasting rest & happiness where I shall dwell  
ever in presence & enjoyment of him whom I ~~dearest~~ shall <sup>near</sup> endeavor to imi-  
tate, "going about doing good" to bodies & souls of men & saying I  
may be able to say "I hope at least my lamp has shewn & good of others!"  
Hear my humble petitions. & accept of me ever more Amen

In the 24<sup>th</sup> yr of my age March 6<sup>th</sup> Wm. Shmead

1826

I B. I commenced study of medicine July 6<sup>th</sup> 1823

[illegible]

# Summary of directions on hernia Dr J. B. R. H.

58

When old to cholic always suspect hernia many a case of hernia  
I have no gone down to give some of cholic

Not superb attack is so to struggle at internal ring of it very easily with  
able the attack by eye that coming.

Stand at internal ring is not so rapid as at external it not by so tight

I do not spare light on myself speak the return to caliche and answers

In any sack you offely will exist must be exposed in distrophy (sack & intestine)  
Dr. Ellard went well are not spent to obtain. Altho of a job at I believe in  
on caliche will in suspect it a job approved of the signs the caliche small  
once known is more frequent.

In distrophy of most cases made is to let it lie in need a short time and not more  
blessed of rest

In most of omentum let it off of the off abdominal contents by gently tightening  
of a ligature.

In case of long stand, no omentum in sack it becomes esophageal if it be not

turned; it not only exists in part of all as from belly. & in rectum (part not be so  
reduced & extensive in case the type hernia might be the place but if it is unsound & the  
its bulk may cut it off over external ring.

In case of long stand, considerable spleen should be kept in mind of on any  
sack no spleen should be old exposed omentum be not adhesion to belly not to symptoms  
that intestine is stronger on belly than omentum like the crown of an arch a kind of support  
sack no find in omentum & entering spleen of intestine

I am by all that I do not regret ever my presence of spleen too early but often  
too late with most of blood not in spleen & myself present not let the change



[illegible]

[illegible]

[illegible]

[illegible]



[illegible]

18

[illegible]

[illegible]

Feb. 7<sup>th</sup> 1826. It does not ulcerate as soon as other kind of  
a 3<sup>rd</sup> kind goes on to form scabs on, but, of greater bad taken  
It is as intst for sup. after my assertion, earwax of men, to feel  
silly glands as it is the pharynx to feel ple. When a lot is spent  
it is of grt importance to collect tablets that are not occurs espell  
when the tumor is small. I cannot butw. (ever) of scabs.  
tumor, such is pucker of leaden clud bet into scabs bet scabs  
a bulge, more as a adence to spot.

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